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SELECTIVE PLACEMENT FOR THE HANDICAPPED

TRAINING PROGRAM INSTRUCTOR'S DISCUSSION OUTLINES

WAR MANPOWER COMMISSION
UNITED STATES EMPLOYMENT SERVICE
WASHINGTON, D. C.
DECEMBER, 1943

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FOREWORD

The material in these Discussion Outlines has been developed through long and successful experience of the United States Employment Service in placing handicapped workers. It has been enriched by the Discussion Guides prepared and effectively used for in-service training programs. The entire training program was developed from practical and effective experience. For the development of these Outlines, we wish to express appreciation to the staff of the New York War Manpower Commission, an agency which has had successful experience in the placement of handicapped workers over a period of years.

Social Welfare (large)

U.S. Employment service

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TABLE OF CONTENTS

	<u>Page</u>
Introduction	1
Suggestions for Planning the Course	5
Use of the Instructor's Discussion Outline	7
Unit 1-a The Employment Service's Concern with the Placement of the Handicapped	9
Purpose of training program	13
Survey of the plan for the sessions	14
The new handbook	16
Definition of the handicapped	18
Categories of the handicapped	18
Handicaps requiring selective placement	19
Distinction between physical handicaps and occupational handicaps	24
Recent changes in attitude toward handicaps	24
Present concern of Employment Service for placement of the handicapped	26
Unit 1-b The Physical Demands Analysis as an Interviewer's Tool . .	31
Recent development of the physical demands technique	36
The physical demands analysis	37
Brief review of job analysis as the basis for physical demands analysis	39
The Physical Demands Analysis Form for a job	42
The Physical Capacities Appraisal form	52
Unit 2-a Use of Other Occupational Information Tools in Placement of the Handicapped	67
Relation of the Physical Demands Analysis to the other occupational information tools	67
Review of the use of occupational information by any interviewer	67
Use of occupational information tools in choosing the general field of work	68
Choosing the proper classification and code	73
Unit 2-b Vocational Aspects of Common Disabilities (1) Hearing and Speech and (2) Orthopedic Disabilities	77
The kind of additional information needed: physical facts and work capacity	82
Sources of such information	83
The aim of the discussions of medical facts in these sessions .	84
The most common disabilities	85
Elements needed for placement of any handicapped worker . . .	85
Considerations for uncovering any non-visible handicap	86
Hearing and Speech	87
Orthopedic Disabilities	
Physical facts about orthopedic handicaps in general	105
Arm and hand disabilities	106
Legs and feet	111
Back and spinal column	114

TABLE OF CONTENTS

Page

1	Introduction
2	Statement of Purpose
3	Outline of the Report
4	1. The Background
5	2. The Problem
6	3. The Method
7	4. The Results
8	5. The Discussion
9	6. The Conclusion
10	7. The References
11	8. The Appendix
12	9. The Bibliography
13	10. The Glossary
14	11. The Index
15	12. The Summary
16	13. The Acknowledgments
17	14. The Dedication
18	15. The Foreword
19	16. The Preface
20	17. The Introduction
21	18. The Statement of Purpose
22	19. The Outline of the Report
23	20. The Background
24	21. The Problem
25	22. The Method
26	23. The Results
27	24. The Discussion
28	25. The Conclusion
29	26. The References
30	27. The Appendix
31	28. The Bibliography
32	29. The Glossary
33	30. The Index
34	31. The Summary
35	32. The Acknowledgments
36	33. The Dedication
37	34. The Foreword
38	35. The Preface
39	36. The Introduction
40	37. The Statement of Purpose
41	38. The Outline of the Report
42	39. The Background
43	40. The Problem
44	41. The Method
45	42. The Results
46	43. The Discussion
47	44. The Conclusion
48	45. The References
49	46. The Appendix
50	47. The Bibliography
51	48. The Glossary
52	49. The Index
53	50. The Summary
54	51. The Acknowledgments
55	52. The Dedication
56	53. The Foreword
57	54. The Preface
58	55. The Introduction
59	56. The Statement of Purpose
60	57. The Outline of the Report
61	58. The Background
62	59. The Problem
63	60. The Method
64	61. The Results
65	62. The Discussion
66	63. The Conclusion
67	64. The References
68	65. The Appendix
69	66. The Bibliography
70	67. The Glossary
71	68. The Index
72	69. The Summary
73	70. The Acknowledgments
74	71. The Dedication
75	72. The Foreword
76	73. The Preface
77	74. The Introduction
78	75. The Statement of Purpose
79	76. The Outline of the Report
80	77. The Background
81	78. The Problem
82	79. The Method
83	80. The Results
84	81. The Discussion
85	82. The Conclusion
86	83. The References
87	84. The Appendix
88	85. The Bibliography
89	86. The Glossary
90	87. The Index
91	88. The Summary
92	89. The Acknowledgments
93	90. The Dedication
94	91. The Foreword
95	92. The Preface
96	93. The Introduction
97	94. The Statement of Purpose
98	95. The Outline of the Report
99	96. The Background
100	97. The Problem
101	98. The Method
102	99. The Results
103	100. The Discussion
104	101. The Conclusion
105	102. The References
106	103. The Appendix
107	104. The Bibliography
108	105. The Glossary
109	106. The Index
110	107. The Summary
111	108. The Acknowledgments
112	109. The Dedication
113	110. The Foreword
114	111. The Preface
115	112. The Introduction
116	113. The Statement of Purpose
117	114. The Outline of the Report
118	115. The Background
119	116. The Problem
120	117. The Method
121	118. The Results
122	119. The Discussion
123	120. The Conclusion
124	121. The References
125	122. The Appendix
126	123. The Bibliography
127	124. The Glossary
128	125. The Index
129	126. The Summary
130	127. The Acknowledgments
131	128. The Dedication
132	129. The Foreword
133	130. The Preface
134	131. The Introduction
135	132. The Statement of Purpose
136	133. The Outline of the Report
137	134. The Background
138	135. The Problem
139	136. The Method
140	137. The Results
141	138. The Discussion
142	139. The Conclusion
143	140. The References
144	141. The Appendix
145	142. The Bibliography
146	143. The Glossary
147	144. The Index
148	145. The Summary
149	146. The Acknowledgments
150	147. The Dedication
151	148. The Foreword
152	149. The Preface
153	150. The Introduction
154	151. The Statement of Purpose
155	152. The Outline of the Report
156	153. The Background
157	154. The Problem
158	155. The Method
159	156. The Results
160	157. The Discussion
161	158. The Conclusion
162	159. The References
163	160. The Appendix
164	161. The Bibliography
165	162. The Glossary
166	163. The Index
167	164. The Summary
168	165. The Acknowledgments
169	166. The Dedication
170	167. The Foreword
171	168. The Preface
172	169. The Introduction
173	170. The Statement of Purpose
174	171. The Outline of the Report
175	172. The Background
176	173. The Problem
177	174. The Method
178	175. The Results
179	176. The Discussion
180	177. The Conclusion
181	178. The References
182	179. The Appendix
183	180. The Bibliography
184	181. The Glossary
185	182. The Index
186	183. The Summary
187	184. The Acknowledgments
188	185. The Dedication
189	186. The Foreword
190	187. The Preface
191	188. The Introduction
192	189. The Statement of Purpose
193	190. The Outline of the Report
194	191. The Background
195	192. The Problem
196	193. The Method
197	194. The Results
198	195. The Discussion
199	196. The Conclusion
200	197. The References
201	198. The Appendix
202	199. The Bibliography
203	200. The Glossary
204	201. The Index
205	202. The Summary
206	203. The Acknowledgments
207	204. The Dedication
208	205. The Foreword
209	206. The Preface
210	207. The Introduction
211	208. The Statement of Purpose
212	209. The Outline of the Report
213	210. The Background
214	211. The Problem
215	212. The Method
216	213. The Results
217	214. The Discussion
218	215. The Conclusion
219	216. The References
220	217. The Appendix
221	218. The Bibliography
222	219. The Glossary
223	220. The Index
224	221. The Summary
225	222. The Acknowledgments
226	223. The Dedication
227	224. The Foreword
228	225. The Preface
229	226. The Introduction
230	227. The Statement of Purpose
231	228. The Outline of the Report
232	229. The Background
233	230. The Problem
234	231. The Method
235	232. The Results
236	233. The Discussion
237	234. The Conclusion
238	235. The References
239	236. The Appendix
240	237. The Bibliography
241	238. The Glossary
242	239. The Index
243	240. The Summary
244	241. The Acknowledgments
245	242. The Dedication
246	243. The Foreword
247	244. The Preface
248	245. The Introduction
249	246. The Statement of Purpose
250	247. The Outline of the Report
251	248. The Background
252	249. The Problem
253	250. The Method
254	251. The Results
255	252. The Discussion
256	253. The Conclusion
257	254. The References
258	255. The Appendix
259	256. The Bibliography
260	257. The Glossary
261	258. The Index
262	259. The Summary
263	260. The Acknowledgments
264	261. The Dedication
265	262. The Foreword
266	263. The Preface
267	264. The Introduction
268	265. The Statement of Purpose
269	266. The Outline of the Report
270	267. The Background
271	268. The Problem
272	269. The Method
273	270. The Results
274	271. The Discussion
275	272. The Conclusion
276	273. The References
277	274. The Appendix
278	275. The Bibliography
279	276. The Glossary
280	277. The Index
281	278. The Summary
282	279. The Acknowledgments
283	280. The Dedication
284	281. The Foreword
285	282. The Preface
286	283. The Introduction
287	284. The Statement of Purpose
288	285. The Outline of the Report
289	286. The Background
290	287. The Problem
291	288. The Method
292	289. The Results
293	290. The Discussion
294	291. The Conclusion
295	292. The References
296	293. The Appendix
297	294. The Bibliography
298	295. The Glossary
299	296. The Index
300	297. The Summary
301	298. The Acknowledgments
302	299. The Dedication
303	300. The Foreword
304	301. The Preface
305	302. The Introduction
306	303. The Statement of Purpose
307	304. The Outline of the Report
308	305. The Background
309	306. The Problem
310	307. The Method
311	308. The Results
312	309. The Discussion
313	310. The Conclusion
314	311. The References
315	312. The Appendix
316	313. The Bibliography
317	314. The Glossary
318	315. The Index
319	316. The Summary
320	317. The Acknowledgments
321	318. The Dedication
322	319. The Foreword
323	320. The Preface
324	321. The Introduction
325	322. The Statement of Purpose
326	323. The Outline of the Report
327	324. The Background
328	325. The Problem
329	326. The Method
330	327. The Results
331	328. The Discussion
332	329. The Conclusion
333	330. The References
334	331. The Appendix
335	332. The Bibliography
336	333. The Glossary
337	334. The Index
338	335. The Summary
339	336. The Acknowledgments
340	337. The Dedication
341	338. The Foreword
342	339. The Preface
343	340. The Introduction
344	341. The Statement of Purpose
345	342. The Outline of the Report
346	343. The Background
347	344. The Problem
348	345. The Method
349	346. The Results
350	347. The Discussion
351	348. The Conclusion
352	349. The References
353	350. The Appendix
354	351. The Bibliography
355	352. The Glossary
356	353. The Index
357	354. The Summary
358	355. The Acknowledgments
359	356. The Dedication
360	357. The Foreword
361	358. The Preface
362	359. The Introduction
363	360. The Statement of Purpose
364	361. The Outline of the Report
365	362. The Background
366	363. The Problem
367	364. The Method
368	365. The Results
369	366. The Discussion
370	367. The Conclusion
371	368. The References
372	369. The Appendix
373	370. The Bibliography
374	371. The Glossary
375	372. The Index
376	373. The Summary
377	374. The Acknowledgments
378	375. The Dedication
379	376. The Foreword
380	377. The Preface
381	378. The Introduction
382	379. The Statement of Purpose
383	380. The Outline of the Report
384	381. The Background
385	382. The Problem
386	383. The Method
387	384. The Results
388	385. The Discussion
389	386. The Conclusion
390	387. The References
391	388. The Appendix
392	389. The Bibliography
393	390. The Glossary
394	391. The Index
395	392. The Summary
396	393. The Acknowledgments
397	394. The Dedication
398	395. The Foreword
399	396. The Preface
400	397. The Introduction
401	398. The Statement of Purpose
402	399. The Outline of the Report
403	400. The Background
404	401. The Problem
405	402. The Method
406	403. The Results
407	404. The Discussion
408	405. The Conclusion
409	406. The References
410	407. The Appendix
411	408. The Bibliography
412	409. The Glossary
413	410. The Index
414	411. The Summary
415	412. The Acknowledgments
416	413. The Dedication
417	414. The Foreword
418	415. The Preface
419	416. The Introduction
420	417. The Statement of Purpose
421	418. The Outline of the Report
422	419. The Background
423	420. The Problem
424	421. The Method
425	422. The Results
426	423. The Discussion
427	424. The Conclusion
428	425. The References
429	426. The Appendix
430	427. The Bibliography
431	428. The Glossary
432	429. The Index
433	430. The Summary
434	431. The Acknowledgments
435	432. The Dedication
436	433. The Foreword
437	43

TABLE OF CONTENTS

Page

Units 3-a and 3-b Respiratory, Cardiovascular, Miscellaneous	
Disabilities	123
Respiratory diseases	123
Cardiac disabilities	129
Vascular diseases	139
Miscellaneous disabilities	
Hernia	140
Stomach ulcers	141
Tumors and cancers	142
Diabetes Mellitus	142
Venereal diseases	142
Kidney ailments	144
Glandular disturbances	144
Skin diseases	145
Cosmetic defects	145
Pregnancy	146
Unit 4-a & b Visual Handicaps, Mental Disorders, Neurological Disorders	149
Visual handicaps	153
Mental disorders	160
Neurological disorders	173
Unit 5-a Review of Best Methods for Placement of the Handicapped	
and Assistance to Those Not Immediately Placeable	187
Review of the elements in the process of placing the	
handicapped	191
Review of special techniques for uncovering handicaps	191
Review of best techniques for securing information from	
applicant	192
Review of the considerations involved in securing medical	
reports	194
Review of best practices in recording information	195
Review of best techniques for matching physical capacities	
with the physical demands of jobs	196
Assistance to handicapped workers who are not immediately	
employable	204
Brief survey of laws relating to the employment of the	
handicapped	210
Unit 5-b Special Consideration for the Placement of Handicapped	
Veterans	213
The veterans as part of the handicapped group	215
Present enthusiasm of employers	215
Responsibility of the Public Employment Service	215
The size of the problem	216
Activities of other agencies	217
Present activities of the Public Employment Service on	
behalf of veterans	218
Role of the placement interviewers in the process of adjusting	
returned veterans	225

TABLE 1

1	...
2	...
3	...
4	...
5	...
6	...
7	...
8	...
9	...
10	...
11	...
12	...
13	...
14	...
15	...
16	...
17	...
18	...
19	...
20	...
21	...
22	...
23	...
24	...
25	...
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95	...
96	...
97	...
98	...
99	...
100	...

TRAINING PROGRAM FOR SERVING THE HANDICAPPED

Why Train for Serving the Handicapped?

Employment Offices throughout the country are already expanding their work with veterans returning from active service, many of them with physical or mental handicaps. A new tool, the Physical Demands Analysis technique, has been developed for use in the placement of any workers with disabilities and a new handbook for serving the physically and the mentally handicapped has been prepared for countrywide use. This new technique emphasizes what the worker still has, rather than what he has lost.

The issuance of a handbook to local office interviewers, however, is not enough. Interviewers specializing in serving the physically handicapped need intensive training on how to do this job effectively. Therefore, the following program has been developed for these interviewers.

The training materials specifically prepared for the training program include:

1. Instructors Discussion Outlines
2. Trainee's Casebook
3. Instructor's Casebook (with answers)
4. "Selective Placement for the Handicapped"

The outlines cover all the material necessary for five days of instruction. Individual state procedures and policies may be discussed on the sixth day, to complete a full week.

What are the Objectives of this Program?

The objectives of the program are:

1. To develop in interviewers who will be concerned with placing the physically and mentally handicapped:
 - a. An understanding of the work capacities and suitable working conditions for such applicants, and
 - b. An appreciation of the problems involved in their placement.
2. To equip these interviewers with:
 - a. A working knowledge of a tool, the Physical Demands Analysis, for determining the physical activities and environmental conditions of a job and the physical capacities of and the

most desirable working conditions for an applicant; and

- b. Basic information about the occupational implications of common handicaps, as presented in the handbook, "Selective Placement for the Handicapped".

What, Specifically, is Covered in this Program?

<u>Unit</u>	<u>Subject</u>	<u>Timing</u>
1-a	The Employment Service's Concern with the Placement of Handicapped Workers	(1st morning, 1½ hours)
1-b	The Physical Demands Analysis as an Interviewer's Tool	(1st morning and afternoon, 4½ hours)
2-a	Use of Other Occupational Information Tools in the Placement of the Handicapped	(2nd morning, 1½ hours)
2-b	Vocational Aspects of Common Disabilities: (1) Hearing and Speech (2) Orthopedics	(2nd morning and afternoon, 4½ hours)
3-a & 3-b	Vocational Aspects of Common Disabilities: (3) Respiratory, (4) Cardiovascular, (5) Miscellaneous	(3rd morning and afternoon, 6 hours)
4-a & 4-b	Vocational Aspects of Common Disabilities: (6) Visual, (7) Neurological, and (8) Mental	(4th morning and afternoon, 6 hours)
5-a & 5-b	Summary of Placement Techniques, Special Considerations for Veterans, and Laws	(5th morning and afternoon, 6 hours)
6-a & 6-b	Local Procedures	(6th day)

Each outline represents a unit of instruction, but they are not all of the same length because of the way in which the subject breaks.

The suggested timing is not intended to be precise, but will serve as a general guide in directing the sessions. It is based on a trial of the outlines conducted in Region II, New York City, in September 1943.

Who is to be Trained?

All interviewers specializing in service to the handicapped should receive this training. Included are, of course, interviewers of discharges at Army and Navy hospitals.

Veterans registered at hospitals before discharge may be returning to any part of the country; their cards precede them to the appropriate local office. Inasmuch as these disabled veterans may appear for service at local offices all over the country, it is important that every employment office have at least one interviewer qualified and trained to do a careful selective placement job for the physically handicapped.

This program represents specialized training and is to be given to experienced interviewers with a sound knowledge of employment service procedure and the use of employment service tools.

What Training Do the Instructors Need?

Persons teaching the program should become familiar with it either by attending an Instructor's Training Conference or by participating as a trainee in the program itself as given by a capable instructor.

Essential for every teacher of the program is a knowledge of the job analysis technique, since the approach to the placement of the handicapped is based upon the physical demands analysis method--an outgrowth of job analysis.

Suggestions for Planning the Course

1. Don't try to include more than 12 or 15 trainees in the group-- It's difficult to handle a larger number, particularly in such sessions as the practice Physical Demands Analysis.
2. Try to include some guest discussion leaders. Six days of full time instructions by one person is hard on both you and the trainees.

You Might Ask

To Handle

Veterans Employment Representative	- Disabled Veterans
Occupational Analyst	- Physical Demands Analysis
Rehabilitation Agency Representative	

If the course is being given to hospital interviewers, you might ask the Commanding Officer of a Navy or Army hospital to describe to the class the general set-up of his hospital. Also a representative from the Red Cross might be invited to describe the work of that organization in the Army and Navy hospitals.

3. Depending on their availability in the community where the course is being given, visits might be arranged, during the course, to hospitals, sheltered workshops, or training schools for the handicapped.
4. Throughout the course, have the trainees refer to the Medical Dictionary, often enough so that it will become a familiar working tool.
5. The sixth day is left for "local procedures." Also this extra time may be used for visits described above or for additional emphasis to subjects, as needed.

USE OF THE INSTRUCTOR'S DISCUSSION OUTLINE

The discussion form is used rather than lecture, in order to provide for using the experience and information of the trainees to the best possible advantage.

Purposes of the Outline

The outline is prepared in this form to serve two purposes:

1. To prepare the instructor:
 - a. By bringing together all the facts and ideas that he must master in order to conduct the unit of instruction, and,
 - b. To organize them for him in an effective learning order. (Effective both for himself and for the subsequent trainees)
2. To provide the instructor with a guide for use on the floor, in the actual conduct of the session - a readily visible reminder of the order of points he must make.

Explanation of the Format

Each page is presented in two columns:

1. A topical skeleton outline: the left column contains the topical outline which is the skeleton of the essential points to be made, in the order of their desirable presentation. Suggestions to the instructor such as direct questions and suggestions for use of the blackboard, are included parenthetically in the column on the left, and signaled by asterisks. The wording of summaries and transition items, as important links in the session, are also placed in the left column.

This skeleton, labeled "Points to be Made," is useful in accomplishing both purposes of the outline, preparation of the instructor and providing a usable guide. However, its primary usefulness is in the session itself.

2. Full presentation: the right column contains a complete presentation of the instruction. It is seldom, if ever, consulted during a meeting, except to verify some fact or idea.

The materials in the right-hand column can either be presented by the instructor, or drawn from the group by use of questions and other stimulation to discussion. The more that comes from the group, the more effective the session will be. The full wording may serve to suggest manner and tone of presentation to the instructor.

How to Study the Outline

The outlines can be grasped most readily at first reading if they are read section by section. Each section begins with a Roman Numeral. Start with the topical skeleton outline in the left column and then read through the full presentation of supporting material on the right. Either column can be read independently of the other.

Instructor's Discussion Outline

THE EMPLOYMENT SERVICE'S CONCERN WITH THE PLACEMENT OF THE HANDICAPPED

Objective: To acquaint interviewers who participate in placing the physically and the mentally handicapped with the new importance of their field, and with the size of the problem, the categories of handicapped workers, and the responsibility of the Employment Service in their placement.

- Outline of
Main Points:
1. Presentation of the plan of the training course as a whole
 2. Survey of the individuals who constitute the "handicapped" among workers
 3. Presentation of the categories of handicapped workers
 4. Survey of the changing social attitude toward handicaps
 5. Exposition of the specific responsibility of the public employment service in placing the handicapped.

Training Program for Serving the Handicapped

Unit 1-a
First Morning (1½ hours)

REMINDERS FOR THE INSTRUCTOR

First Day
1-a Morning

Materials Needed

1. Supply of the handbook, "Selective Placement for the Handicapped," (1943) for each trainee.

Points to be Made

Suggested Supporting Material

MOTIVATION (30 minutes)

I. Purpose of training program:
To equip interviewers for
placement of handicapped

A. Present urgent need for
utilizing the handicapped

1. For war production

2. To readjust returning
veterans

B. Techniques for handicapped
similar to other placement
methods, but more detailed

1. Additional information
required

- * (Ask what additional
- * information is needed by
the interviewer who works
with the handicapped.

List items on blackboard
as given.)

2. "Selective Placement"
descriptive term used
for special techniques

I. Interviewers in the Employment Service have become increasingly aware of the importance of effective placement service for physically or mentally handicapped applicants.

A. Two factors in our country's economic life have emphasized this problem for us:

1. Urgent need to utilize in the labor market skills of all workers, handicapped or otherwise.

2. Our participation in the program of returning to productive work the disabled veterans being released from the armed forces.

B. Techniques involved in placing the physically and the mentally handicapped are the same as those required in other placements, but are more intensively applied. The basic principles of understanding applicants and knowing their requirements are the same.

1. However, in order to match the two successfully interviewers must have more detailed information about:

a. Jobs--in terms of what they demand of the worker in the way of physical activities and working conditions;

b. The vocational effect of handicaps--in terms of what working capacity of the individual remains unimpaired; and

c. The other sources of help available to handicapped workers in the community, such as rehabilitation and training assistance.

2. For convenience, the term "selective placement" is used to describe the additional techniques used in the placement of handicapped workers. The term may be misleading if it implies that placement techniques for other workers are not "selective." As used in these discussions, the term "selective placement" means merely the set of methods used to meet the special problems of handicapped workers.

Points to be Made	Suggested Supporting Material
<p>3. "Selective Placement" a refinement of job analysis and of interviewing technique</p>	<p>3. "Selective Placement" for the handicapped thus involves both a refinement of job analysis method, to analyze the exact physical demands of jobs, and a refinement of interviewing technique, to take into account the vocational effect of different disabilities and to provide for getting technical physical information from applicants and from medical reports from physicians.</p>
<p>C. <u>Satisfactions of the interviewer's job</u></p>	<p>Stated in still another way, both the handicapped worker and the job he is being considered for must be scrutinized with special care so that the work capacity of the individual and the physical demands of the job can be matched.</p>
<p>C. The job is difficult but challenging. The satisfactions derived from returning a handicapped worker to the labor market more than compensate for additional time and effort required to place him.</p>	
<p>I. <u>Survey of the plan for the sessions</u></p>	<p>II. This training program introduces use of a new handbook, "Selective Placement for the Handicapped."</p>
<p>A. <u>Specific purposes to be accomplished</u></p>	<p>A. The series is designed:</p>
<p>1. Understanding of interviewer's responsibility</p>	<p>1. To create an understanding of the responsibilities of the interviewers for the handicapped in this placement program;</p>
<p>2. Comprehension of the <u>work capacity</u> of the handicapped</p>	<p>2. To develop a real comprehension of the work capacity of the physically and mentally handicapped, and how it may be used; and</p>
<p>3. Working knowledge of the tools</p>	<p>3. To develop a working knowledge of tools and techniques which will enable interviewers to place handicapped applicants satisfactorily in productive work.</p>
<p>B. <u>Limitations on the material</u></p>	<p>B. Not all the "answers" can be covered in the sessions, but the survey should provide enough information to enable interviewers to obtain specific information when they need it.</p>

Points to be Made	Suggested Supporting Material
C. <u>Topics to be covered:</u>	C. This series will cover the following topics:
<ol style="list-style-type: none"><li data-bbox="111 305 550 334">1. Who are the handicapped?<li data-bbox="111 436 500 523">2. The physical demands analysis as an interviewer's tool<li data-bbox="111 566 550 624">3. Vocational aspects of most common disabilities<li data-bbox="111 759 530 817">4. Special placement techniques to be used<li data-bbox="111 952 515 1010">5. Special considerations for veterans<li data-bbox="111 1049 550 1145">6. Other considerations for working with community agencies<li data-bbox="111 1280 480 1338">7. Local procedures and suggestions	<ol style="list-style-type: none"><li data-bbox="692 305 1418 401">1. Definitions of who the handicapped are, of what we mean by selective placement, and when it is necessary.<li data-bbox="692 436 1453 533">2. The most important new tool in the placement of the handicapped: the Physical Demands Analysis--what it is, and how to use it.<li data-bbox="692 566 1448 720">3. The next four days will be devoted to the common disabilities such as loss of hearing, or sight, speech, or orthopedic impairment, limitations due to heart or lung conditions, and nervous and mental disorders.<li data-bbox="692 759 1453 913">4. The special techniques important for proper placement of workers with each handicap will be discussed both at the time we consider the particular handicap, and again in a review on the fifth day.<li data-bbox="692 952 1508 1010">5. Some time will be devoted to additional aids for placing disabled veterans.<li data-bbox="692 1049 1453 1242">6. Problems involved in securing work opportunities for handicapped applicants, as well as what we can do to serve those who are not immediately placeable and who need training, therapy, or other forms of assistance.<li data-bbox="692 1280 1422 1435">7. The last day will be reserved for a review of the specific procedures by means of which these techniques will be put in operation in the local employment offices in your area.
D. <u>Time schedule for the discussions</u>	D. In general our discussions during the entire week will include three-hour meetings each morning and afternoon, broken by rest periods.

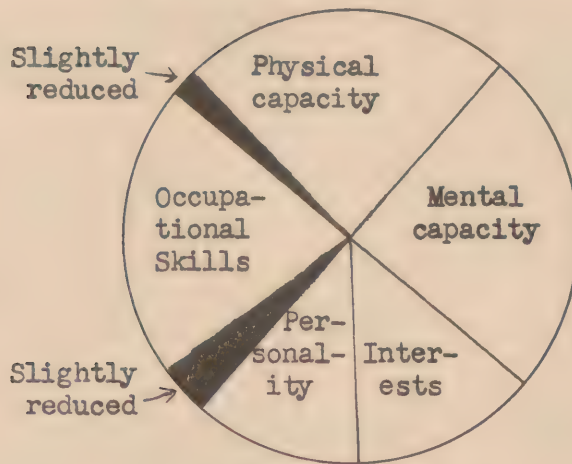
Points to be Made	Suggested Supporting Material
<p>I. <u>Inquiry into the experience with the handicapped possessed by members of the training group</u></p> <p>* (The instructor should inquire * from the trainees the length of time that they have devoted to placing handicapped workers, either in the Employment Service or in other employment.</p> <p>Note on the blackboard the number of years of such experience for each individual, and total the amount for the group as a whole.)</p> <p>A. <u>All interviewers bring some experience</u></p> <p>B. <u>Even extensive experience may benefit by review and analysis</u></p> <p>C. <u>Those with limited experience need thorough grounding</u></p>	<p>III. In order to get as much benefit as possible from these discussions, the instructor will need information concerning the amount of acquaintance with the subject that is possessed by the particular group, so that he can adapt the discussions accordingly.</p> <p>A. Every placement worker at some time has placed a handicapped worker, so that the question can not be totally new.</p> <p>B. Even interviewers who have specialized in work with the handicapped can benefit from an organized review of the field, and from a consideration of the new approach recently developed and embodied in the new handbook.</p> <p>C. These training sessions can provide the interviewer just beginning to specialize in the work for the handicapped with the necessary framework for developing his professional background and with the minimum data he needs to begin his work.</p>
<p>7. <u>The new handbook</u></p> <p>Distribute to the trainees their copies of the handbook</p> <p>A. <u>A personal working tool</u></p>	<p>IV.</p> <p>A. The handbook represents a personal working tool for each interviewer. He can keep it in his desk and refer to it either as a source of information in itself or as a lead to other sources of information he may need in his work.</p>

Points to be Made	Suggested Supporting Material
<p data-bbox="30 202 294 241">B. <u>Its contents</u></p> <p data-bbox="90 270 438 367">Ask the group to look through the table of contents.</p> <ol data-bbox="90 396 544 956" style="list-style-type: none"><li data-bbox="90 396 453 434">1. The methods section<li data-bbox="90 521 544 598">2. The section on individual handicaps<li data-bbox="90 753 544 830">3. Other features, including bibliography<li data-bbox="90 879 468 956">4. The Physical Demands Analysis section	<p data-bbox="619 202 657 241">B.</p> <ol data-bbox="665 396 1481 1120" style="list-style-type: none"><li data-bbox="665 396 1360 502">1. The first section includes best current methods for interviewing and placing the handicapped.<li data-bbox="665 521 1481 724">2. The second section gives the minimum of technical information concerning disabilities and handicaps that commonly occur in the population, stressing the vocational aspects of each one and highlighting the work capacity that remains with the individual.<li data-bbox="665 753 1451 859">3. Also included in the handbook are useful lists of reference works and magazines of interest to special interviewers.<li data-bbox="665 879 1451 1120">4. The Physical Demands Analysis section gives the full technical details of physical demands analysis as a refinement of job analysis technique. It shows the interviewer how to analyze a job to determine what it requires of the worker in terms of activities and what working conditions it involves.
<p data-bbox="30 1178 544 1246">C. <u>Its use in the sessions as a basic text</u></p>	<p data-bbox="619 1178 1436 1313">C. The handbook will be used in these sessions as the basic text. In preparation for each discussion, the group will read the information in the handbook on this subject to be covered.</p>

Points to be Made	Suggested Supporting Material
<u>PRESENTATION</u> (60 minutes)	
<u>I. Definition of the handicapped</u> (5 minutes)	I. The "handicapped" probably cannot be defined, because they are individuals rather than a group.
* (Ask the group to attempt its * own definition of "who are the handicapped")	
A. <u>Handicapped not a distinct group</u>	A. Contrary to popular impression, the handicapped are <u>not</u> a distinct group of the population readily distinguishable from normal people. Perfection, whether physical, moral, or mental, is a rare thing, if not a theoretical standard which no one actually achieves.
B. <u>Everyone limited in some measure</u>	B. Every person has limitations in some direction. Some cannot run as fast or calculate as rapidly as others, and yet are not considered "different" for this reason.
1. Disabilities in one function have no effect on others	1. By the same token, a person with a disabled leg may be limited in his ability to walk rapidly, to run, lift or carry, but not in his ability to see, hear, or use his hands. The disability does not limit his intelligence and educational achievements, vocational interests and aptitudes, nor need it affect his personality and work habits.
2. Handicapped more like the non-handicapped than different from them	2. He is <u>like</u> the non-handicapped <u>in more respects than</u> he is <u>different</u> . He has sufficient abilities to enable him to be a useful worker and a useful member of society, provided society itself does not impose artificial restrictions inconsistent with the degree of limitation.
* (<u>Example</u> : Ask each trainee * to mention one of his own limitations, in order to demonstrate the point that everyone is limited in some degree.)	
<u>II. Categories of the handicapped</u> (10 minutes)	II. Broadly speaking, there are three categories of the handicapped--physical, mental, and social--who come to the Employment Service seeking jobs. The last group includes those who find difficulty securing work because of prison records, and those in racial, religious or other minority groups which are disadvantaged by discriminatory attitudes in any given community.
* (Ask what different kinds of * handicaps applicants present in addition to physical limitations.)	
7-3040 P18 bu	The present series of meetings deals only with the physically and the mentally handicapped.

Points to be Made	Suggested Supporting Material
<p>A. <u>Physical handicaps</u></p> <p>* (Ask the group to name certain common handicaps, and note them on the board in two lists, (1) visible handicaps and (2) non-visible handicaps. Label the lists <u>after</u> they are complete.)</p> <ol style="list-style-type: none"> 1. Visible handicaps 2. Non-visible handicaps <p>B. <u>The mental handicaps</u></p> <ol style="list-style-type: none"> 1. Mental defectives 2. Mental disorders 	<p>A. A physical handicap is any physical deficiency peculiarity or impairment which requires an individual to be selectively placed. Physical defects fall into two broad groups:</p> <ol style="list-style-type: none"> 1. <u>Visible</u> or readily apparent, such as lameness, spinal curvature, or facial disfigurement, and 2. <u>Not visible</u> or readily discernible, such as heart trouble, hernia, or arrested tuberculosis. <p>B. A mental handicap, for purposes of our work, is any mental deficiency, peculiarity or impairment which requires an individual to be selectively placed. There are two different groups of mental handicaps:</p> <ol style="list-style-type: none"> 1. Those whose mentality is under-developed, sometimes called the feeble minded; and 2. Those whose intellectual capacity is not impaired but who are mentally ill.
<p>II. <u>Handicaps requiring selective placement</u> (20 minutes)</p> <p>* (The charts presented on the next page should be used to illustrate this discussion.)</p> <p>A. <u>When occupation must be modified or changed</u></p> <ol style="list-style-type: none"> 1. <u>Example</u>: Loss of hand by machine operator (Use Chart I to show the capacity of the sewing machine operator on the blackboard. Stress the size of the unaffected work capacity as shown by the white space.) 	<p>III. Not all handicaps are sufficiently limiting to the individual to make him a problem in placement. It is possible to define in a general way the conditions that do require "selective placement."</p> <p>A. Some handicaps prevent a worker from continuing his usual occupation and make selective placement necessary even though the applicant loses only a very small part of his total working capacity.</p> <ol style="list-style-type: none"> 1. This point is clearly demonstrated if we consider that a sewing machine operator who loses his right hand has lost none of his mental capacity, little if any of his personality, none of his interests, none of his aptitudes, and a comparatively small portion of his occupational skill.

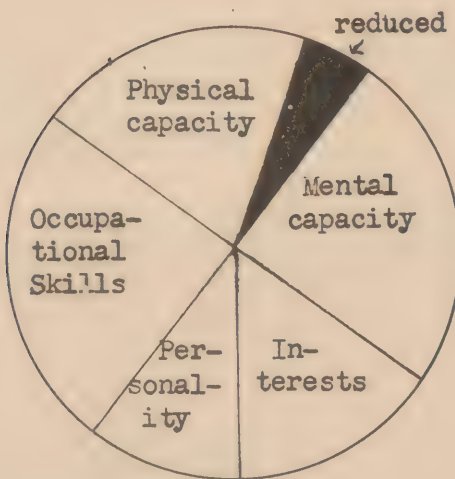
CHART NO. I Effect of Loss of Right Hand on Working Capacity of a Sewing Machine Operator



Circle = Total working capacity
Shaded portion indicates reduction

No other capacities affected

CHART NO. II Effect of Loss of a Leg on the Working Capacity of a Stenographer



Circle = Total working capacity
Shaded portion indicates reduction

No capacity affected except physical capacity

Points to be Made	Suggested Supporting Material
<p>B. <u>When the worker would encounter "employer resistance"</u></p> <p>1. <u>Example</u>: Stenographer who loses a leg.</p> <p>* (Use Chart II to show the * total work capacity of a stenographer who loses a leg.)</p> <p>C. <u>When the applicant may aggravate his disability or jeopardize the health or safety of others</u></p> <p>1. <u>Example</u>: Crane Operator with cardiac disorder</p> <p>D. <u>When the inexperienced applicant is limited in opportunities for entering an industry, trade, or profession</u></p> <p>1. <u>Example</u>: Boy with severe speech disorder</p>	<p>B. Some handicaps do not in any way constitute an occupational handicap insofar as functioning on the job is concerned, but they may be so considered by an employer.</p> <p>1. For example, a stenographer who loses a leg is not occupationally handicapped, but she might require special assistance to overcome employer resistance.</p> <p>C. Some handicaps require special consideration to prevent the worker from undertaking work likely to aggravate his disability or to cause him to jeopardize the health or safety of others.</p> <p>1. For example, a crane operator who has developed a severe heart condition cannot continue in his occupation without the danger to the safety of other people.</p> <p>D. Some handicaps interfere with the vocational opportunities of young people and require guidance toward suitable lines of work.</p> <p>1. For example, a boy with a severe speech disorder might not be successful in a sales occupation, but should be guided into the trades, agriculture, or certain types of clerical work.</p>
<p>Summarize:</p> <p>Thus, only some handicaps require special treatment for employment purposes: (1) Those requiring change in occupations; (2) Those involving possible employer resistance; (3) Those involving some jeopardy to health; and (4) Those restricting vocational opportunity.</p>	

Points to be Made	Suggested Supporting Material
<p>IV. <u>Distinction between physical handicaps and occupational handicaps</u> (5 minutes)</p> <p>A. <u>Occupational handicaps a lack of capacity</u></p> <p>B. <u>Physical handicap may not be occupational</u></p> <p>1. <u>Example</u>: Deaf printer</p> <p>2. Some have both handicaps</p> <p>a. <u>Example</u>: Stenographer who loses hearing</p> <p>C. <u>Vocational guidance a substantial part of handicapped work</u></p>	<p>IV. The foregoing discussion has pointed up the distinction between physical handicaps and occupational handicaps.</p> <p>A. "Vocational" or "occupational" handicaps, being terms used inter-changeably, both mean the lack of acquired or potential skill for performance in a given field of activity.</p> <p>B. This should not be confused with physical or with mental handicaps.</p> <p>1. A deaf printer, for example, is physically but not occupationally handicapped. He has a definite trade in which hearing is not a factor.</p> <p>2. While some physically and some mentally handicapped people are also occupationally handicapped in that they possess no skills, most of these applicants either have some skills or the ability to acquire them.</p> <p>C. Just as non-handicapped individuals encounter problems of vocational adjustment requiring guidance or counseling, so do the handicapped. Problems are often intensified by their physical or their mental limitations. Young people especially must be guided into occupations which they can perform successfully without aggravating their disabilities where they can succeed with limited or no use of certain bodily activities.</p>
<p>V. <u>Recent changes in attitudes toward handicaps</u> (5 minutes)</p> <p>A. <u>Superstitions underlying social attitudes toward the employment of the handicapped</u></p>	<p>V. The roots of attitudes toward handicapped people lie deep in the experience of the race. Many of the popular attitudes are surrounded in superstition and ignorance.</p> <p>A. Primitive tribes killed or abandoned the crippled and aged who could not provide for themselves, so, as not to endanger the welfare of the entire group.</p> <p>The early Greeks destroyed the physically imperfect in order to improve standards of physical perfection.</p> <p>In some other societies, a person with a physical or mental handicap was regarded as in disfavor with the deity, if not actually in league with the devil</p>

Points to be Made	Suggested Supporting Material
B. <u>Ignorance the fundamental cause of old attitudes</u>	B. Ignorance and inability to understand the causes of abnormalities and diseases led people to seek an explanation in the supernatural. The entire subject, surrounded with fears, was treated as something to be avoided as repugnant.
C. <u>New attitudes based on advances in medical science</u>	C. The development of the sciences of orthopedics in the 19th Century and psychiatry in the 20th Century provided for the correction or improvement of physical and mental defects. These advances in medical science restored many individuals to normal status as self-supporting citizens. The difference between the old "peg leg" and the modern artificial limb is but a single small symbol of the change.
1. Impetus from World Wars I and II	1. Medical knowledge advanced tremendously under the impetus of the work done during the first World War and afterwards.
2. New attitudes toward persons handicapped in the Services	2. The public attitude toward disabilities incurred in a patriotic service has done much to improve the situation of all persons with physical impairment. Rotary Clubs and other fraternal organizations assisted in the development of a new attitude by their philanthropies on behalf of the handicapped.
3. Present critical need to utilize workers	3. At the present time labor shortages compel employers to tap the reservoir of skill found among handicapped persons who cannot meet the high physical standards of the armed forces. Even home-bound workers are now being utilized by war industry.
4. Demonstrated abilities destroy old misconception	4. The performance of the "handicapped" thus given a chance, frequently amazes employers and destroys some of their former misconceptions.
D. <u>Persistence of same old ideas makes placement job difficult</u>	D. But deeply grounded social prejudice dies hard. Employer attitudes still prevent a maximum of employment opportunities for the handicapped, even though society now recognizes a responsibility for the care and education of the disabled. For this reason, employment service personnel must use special techniques and expend greater effort in accomplishing the same placement service for handicapped groups as for others.

Points to be Made	Suggested Supporting Material
E. <u>Need to consider post-war labor market changes</u>	E. When the war-time demand for workers contracts, the problems of maintaining employment opportunities for the handicapped can be expected to be greater as employers find other workers available in large numbers.
I. <u>Present concern of the Employment Service for placement of the handicapped</u> (10 minutes)	VI. We can consider the reasons for the concern of the public employment service with placement of the handicapped in two ways: (1) its continuous responsibilities, and (2) those that take on added importance at the present time.
* (The instructor will note on the board the points developed under this discussion.)	
A. <u>Responsibility for labor utilization</u>	A. The physically and the mentally handicapped now make up a large and still relatively untapped reserve of labor available for work.
1. Statistics overlapping	1. Accurate statistics are almost impossible because of the overlapping of different kinds of disabilities and the difficulty of knowing whether they are chronic or acute or temporary or permanent.
2. Estimated number of physically handicapped 23.6 million	2. According to best estimates of the U.S. Public Health Service, however, there are at present 23.6 million employed and unemployed who have some physical defect or chronic disease. <u>This is a little over 18%, or nearly 1/5 of the population.</u>
3. Age and sex distribution	3. Of these, 16.3 million are in the working age brackets between the ages of 15 and 64 and half of these 8.1 million are men.
4. Size of the placement problem - 6.7 million	4. Among them, 6.7 million need selective placement. One million of these need rehabilitation before employment, while 350,000 should have sheltered work (work in shops that do not compete for profit.)
5. Current reserve of physically handicapped - over two million	5. The current reserve of unemployed handicapped workers probably numbers over two million men and women - a majority with orthopedic impairments.
6. Estimated number of mentally handicapped	6. An estimate of the number of mentally handicapped people, including both feeble-minded and the mentally ill is even more difficult. Some indications may be gleaned from the following estimates:
* (Present very briefly.)	

Points to be Made	Suggested Supporting Material
<p>7. Social responsibility for adjusting individuals</p> <p>* Summarize: * Labor utilization then is a significant point concerning the handicapped, important at all times, but taking on an added and immediate significance in time of national emergency.</p> <p>Another important wartime and post-war responsibility of the Employment Service in this regard is that for placement of returning veterans.</p> <p>B. <u>Responsibility for returning veterans</u></p> <p>1. A major purpose of the present training</p>	<p>a. 1940 Census listed 591,365 persons as confined to mental institutions. Many of these upon discharge may be able to work.</p> <p>b. The armed forces expect to reject or discharge a large number for psychoneurotic reasons during the course of the war.</p> <p>c. About one out of every ten persons will be incapacitated by mental disease in some time during his life.</p> <p>d. There are an estimated six million, 4% of the population, feeble-minded individuals in the United States of whom only 60,000 are in institutions.</p> <p>7. The importance of using the unimpaired work capacity of handicapped people in war production is impossible to overstress. Even in times of peace the social value of using unimpaired work capacity is obvious, in terms of savings to relief funds and of the personal and social adjustment of the individuals.</p> <p>B. The public employment service has a special concern with the proper placement of soldiers who return from active service. Many of these may be physically or mentally handicapped and will require the services of trained placement specialists who can expedite their prompt adjustment to a productive role in their community.</p> <p>1. To assure that every community in the country finds itself equipped with trained personnel who can use the best new methods for placing handicapped workers to speed the satisfactory</p>

Points to be Made	Suggested Supporting Material
C. <u>Permanent legal responsibilities</u>	<p>return to work of veterans is one of the many purposes of the present nationwide program in these techniques.</p> <p>C. The responsibilities of the public employment service system for continuous service to the handicapped and to veterans are both specifically cited in the Wagner Peyser Act of 1933 which provides the legal framework for the Employment Service system.</p>
<p>II. <u>Need for professional attitude</u> (5 minutes)</p> <p>A. <u>Necessity for detachment</u></p> <p>B. <u>Importance of human values</u></p>	<p>VII. Success in any kind of placement work requires a measure of professional detachment from the problems of the applicant.</p> <p>A. Work with the physically handicapped makes special demands of the interviewer in this regard. Your concern for determining the work capacity of individual applicants must be an unemotional one if you are not to defeat your purpose.</p> <p>Pitfalls you must avoid include any manifestation of pity or any other emotional effect that a handicap may have on you personally.</p> <p>B. At the same time your concern with human values must be reflected in your work as it is in any good placement job.</p>
<p><u>SUMMARY</u> (5 minutes)</p>	
I. <u>Summary of who is handicapped</u>	<p>I. To recapitulate then, we have established an understanding of the facts that:</p> <p>A. The concept of a handicap is a variable one.</p> <p>B. No individual is totally without limitations.</p> <p>C. Some physical and mental handicaps constitute a barrier to easy employment that requires the application of additional techniques that we call "selective placement."</p> <p>D. Every worker considered handicapped retains considerable work capacity that can be utilized.</p>

Points to be Made	Suggested Supporting Material
II. <u>Summary of changed attitudes toward handicaps</u>	II. We have discussed the change from early attitudes of fear and repugnance to present attitudes of understanding based on facts about the causes of disabilities.
III. <u>Recapitulation of the Employment Service's Concern</u>	III. We have discussed the general responsibility and the specific legal responsibility of public employment service for the placement and proper utilization of handicapped workers.
IV. <u>The professional attitude in the placement of the handicapped</u>	IV. We have agreed that a placement worker who utilizes the additional techniques of "selective placement" for handicapped workers has at once an added responsibility and an added set of satisfactions.
	<p>To do his job, an interviewer for the handicapped must develop the same professional detachment that a doctor requires. He must be acquainted with a constantly enlarged background of technical information about handicaps and the way they affect working capacity, but he has the constant satisfaction of contributing directly to an important and often delicate adjustment between the unimpaired work capacity of a handicapped applicant and the actual physical demands of jobs.</p>

Transition:

Interviewers in working with the handicapped have long needed a method for determining precisely what the physical demands of jobs are. Such a technique has been developed. It will form the subject of our discussion for the rest of the day and will constitute one of our most important tools.

Training Program for Serving the Handicapped

Unit 1-b

First morning (continued), and

First afternoon

(4½ hours)

Instructor's
Discussion Outline

THE PHYSICAL DEMANDS ANALYSIS
AS AN INTERVIEWER'S TOOL

Objective: To introduce interviewers to the physical demands analysis method as a tool for determining the physical demands of a job and matching them to the work capacity of an individual applicant.

- Outline of
Main Points:
1. Review of the similarities in all types of placement (15 minutes)
 2. Introduction of physical demands analysis as an extension of job analysis (5 minutes)
 3. Explanation of medical and placement office cooperation in a program based on the Physical Demands analysis (10 minutes)
 4. Review of job analysis, as a basis for Physical Demands analysis (40 minutes)
 5. Explanation of the use of the two Physical Demands forms (40 minutes)
 6. Practice in the preparation of the Physical Demands form for an actual job (60 minutes)

Unit 1-b

First morning (continued) and First afternoon

REMINDERS FOR THE INSTRUCTOR

Special Advance Preparation

In addition to thorough study of the discussion outline and of the Physical Demands Analysis section of the handbook, the instructor will want to choose the two jobs easily accessible for observation, to be assigned for physical demands analysis study.

Materials Needed

1. Supply of Occupational Dictionaries (Vol. I) for each trainee
2. Supply of Job-Analysis Schedule forms for each trainee
3. Supply of the Trainee's Exercise Books for each trainee
4. A copy of the Instructor's Exercise Book
5. Supply of Physical Demands Analysis forms for each trainee
6. Supply of 3x5 cards to begin the glossaries

Points to be Made	Suggested Supporting Material
<u>MOTIVATION AND TRANSITION - (20 minutes)</u>	
<p>I. <u>Review of the similarities in placement of the handicapped and the non-handicapped</u> (15 minutes)</p> <p>* (Instructor should develop * this entire section by drawing points from the class and noting them on the blackboard.)</p> <p>A. <u>Basic principles the same for both types of placement</u></p> <p>* (Ask what the instructor * must know about the applicant and about the job for <u>non-handicapped placement</u></p> <p>1. The job-analysis basis</p> <p>* (Ask if we have a tool * for organizing our information on any job?)</p> <p>a. Serves for both work history and orders</p> <p>b. Based on the questions: WHAT, HOW, WHY, and WHAT IS INVOLVED</p>	<p>I. Having established an understanding of <u>who is handicapped</u> and why he appears handicapped, we are ready to turn our attention to how to utilize his skills by matching his unimpaired work capacity with the exact physical demands of jobs.</p> <p>A. The basic principles are the same for the handicapped as for the non-handicapped, namely, the matching of the qualifications of the applicant with the specifications of the job. However, certain additional facts are needed for the handicapped, and the techniques for obtaining and recording them are the subjects of these sessions.</p> <p>1. The Public Employment Service has developed a simple technique based on job analysis for analyzing both applicants and job openings in order to match them.</p> <p>a. For each part of an applicant's work history the interviewer discovers <u>what</u> tasks the applicant did, <u>how</u> he did them and <u>what factors were involved</u> in the way of skill, personal attributes or knowledge. In addition to using this simple analysis to organize the facts about the applicant, the interviewer uses it to organize the facts about the demands of the job.</p> <p>b. He establishes <u>what</u> the job demands from the worker in the way of tasks, <u>how</u> the job is done in terms of tools, machines and processes, <u>why</u> the job is done in terms of net result or product, and the factors <u>involved</u>, such as the skills, information, and personal attributes.</p>

Points to be Made	Suggested Supporting Material
<p>B. <u>Additional elements for placement of the handicapped</u></p> <p>* (Ask what further information is needed to consider in placing the handicapped.)</p> <ol style="list-style-type: none"> 1. Details of remaining work capacity of the applicant. 2. Details of physical demands of jobs 3. <u>Matching</u> must be <u>more</u> precise for the handicapped. 	<p>B. For the handicapped, the interviewer needs the same information, <u>plus</u> how the applicant's physical and mental limitations affect his work capacity.</p> <ol style="list-style-type: none"> 1. He wants to know <u>what the applicant can do</u>, and how he does it, as these may be modified by his mental and physical capacities. 2. Further, he must know in terms of activities what the job demands of the applicant (use of arms, legs, physical strength) as well as what are the working conditions or environmental stresses, (strain of working with others, noise, work pressure.) 3. Necessary emphasis upon these two factors constitutes the difference between placing the handicapped and the non-handicapped. Among all workers and all jobs, we find varying degrees of physical strength, and mental stamina, offered by the worker and demanded by the job.
<p>I. <u>Recent development of the physical demands analysis technique</u></p> <ol style="list-style-type: none"> A. <u>A refinement of job analysis</u> B. <u>Applicable to a worker or a job</u> 	<p>II. A fairly recent development of the occupational research program of the United States Employment Service is the physical demands analysis method.</p> <ol style="list-style-type: none"> A. It represents a further extension of job analysis method. In its simplest terms it is <u>an outline for noting exactly what a job involves in the way of activities that a worker must be able to perform and working conditions he must be able to sustain.</u> B. The physical demands outline of activities and working conditions can be used wither to note the conditions and activities possible for a handicapped <u>individual</u> or to note the activities and working conditions that are part of <u>a given job</u>. Precise matching of the two is thus possible.

Points to be Made	Suggested Supporting Material
<u>PRESENTATION</u>	
<p>I. <u>The Physical Demands Analysis</u> (5 minutes)</p>	<p>I. We have said that the physical demands analysis is an outline for noting both the physical demands of a job and the work capacity of an applicant.</p>
<p>* (The instructor will use the * blackboard during this discussion.)</p>	
<p>A. <u>Meaning of "physical demands"</u></p>	<p>A. Throughout our discussions when we use the term "physical demands" we will understand it to mean a combination of two things: the required physical activities <u>plus</u> the required working conditions of a job.</p>
<p>* (Note the formula on the * board)</p>	<p>1. Stated as a formula, <u>Physical Demands</u> = <u>Physical Activities</u> / <u>working conditions</u>.</p>
<p>B. <u>Meaning of "Work capacity"</u></p>	<p>B. When we use the term "work capacity" it includes physical activities possible for an applicant <u>plus</u> working conditions suitable for him, in view of his limitations.</p>
<p>* (Note the formula)</p>	<p>1. Again, as a formula, <u>Work capacity</u> = <u>Physical Activities</u> / <u>Working conditions</u>.</p>
<p>C. <u>Use of Physical Demands not confined to the handicapped</u></p>	<p>C. As we examine the method in detail we will see that this approach is valuable also in the placement of inexperienced women, the very young, and older workers entering the labor market - in other words, for any placement that requires more than a simple matching of experience with specifications.</p>
<p>II. <u>A Physical Demands Program involving the Interviewer and the Job Analyst, and the cooperating Physician</u> (10 minutes)</p>	<p>II. The outline now developed for physical demands analysis can be used as a basis for a complete program in any employment office in any community. Its full development involves the participation of the Employment Service interviewer, the job analyst, (who may be the interviewer or another specialist), and the medical expert (who may be clinic physician or a private physician.)</p>
<p>A. <u>The work of a job analyst in Physical Demands</u></p>	<p>A. Logically, the Physical Demands program requires that a job analyst first prepare a Physical Demands analysis about a particular job. This step may be accomplished as part of a complete job study in a plant, or it may take place as a separate study to meet a particular need.</p>

Points to be Made	Suggested Supporting Material
<p>B. <u>The medical expert's part in a Physical Demands program</u></p>	<p>B. By the request of an employment office, a physician reports on the physical capacity of a given applicant, using the Physical Demands outline wherever possible to describe the physical activities applicants can perform and the working conditions suitable for them.</p>
<p>C. <u>The interviewer's work in a Physical Demands Program</u></p> <p>1. May include the work of the job analyst</p> <p>2. May include evaluation of work capacity</p>	<p>C. Working from such medical reports, and/or other available information from the applicant, the interviewer can appraise his work capacity and match it with physical demands information about specific jobs.</p> <p>1. In most communities the interviewer himself will have to prepare his own physical demands analysis of openings that he fills.</p> <p>2. He may in some situations not be able to obtain medical reports in terms of the physical demands outline and may have to translate medical diagnoses into job language to determine exactly what work capacity the applicant has.</p>
<p>D. <u>Need for a common language</u></p> <p>1. Misunderstanding of terms</p>	<p>D. Successful placement of handicapped workers almost always involves cooperation between the medical expert and the job expert. The physical-demands analysis provides both with a common language and reduces considerably the possibility of misunderstanding.</p> <p>1. The old terms used by doctors to describe work capacity, such as "light work" for example, are not precise enough to meet the needs of placement workers.</p>
<p>E. <u>Wide variations in present extent of cooperation with doctors</u></p>	<p>E. States vary widely in the extent to which they have developed cooperative relations between the employment service and doctors and hospitals in the community.</p> <p>In some States doctors, both private and industrial, are accustomed to supplying medical reports to public employment offices. For them, the use of the new plan simply requires additional education in the use of the Physical Demands form. In other, the whole idea of cooperating with the employment service will be a new development.</p>

Points to be Made*	Suggested Supporting Material
<p>F. <u>Importance of securing Medical reports in Physical Demands terms</u></p> <p>G. <u>Development of local office program</u></p>	<p>F. Whenever possible, the doctor can make a material contribution to the program if he will himself translate the technical medical terms of the customary report into their occupational meaning as provided for on the Physical Demands form. He is better able than the interviewer to make the translation.</p> <p>G. As Physical Demands analysis forms are accumulated for the various jobs existent in the area served by the Employment Office, there will be less need for the interviewer or occupational analyst to go into establishments and observe jobs.</p> <p>In some communities the occupational analysts have been carrying out a program of preparing Physical Demands forms for all jobs in establishments which are interested in employing persons having unusual physical limitations. The forms are duplicated and made available to the Employment Service office immediately upon being completed and approved by the managers of establishments wherein the jobs were observed.</p> <p>The Employment Service interviewer may then only prepare a Physical Abilities Analysis of the applicant, match these qualifications with the Physical Demands analyses available on job openings, and then make the referral; assuming, of course, that the applicant meets the job specification requirements for training and work experience.</p>
<p>III. <u>Brief Review of job analysis as the basis for physical demands analysis</u> (40 minutes)</p> <p>* (NOTE: If the group has no background whatever in job analysis and this brief survey is not sufficient, it may be necessary to devote a half day to a thorough grounding in job analysis method before proceeding with physical demands analysis.)</p>	<p>III. Before taking up the Physical Demands form in detail a very short review of the basic elements of job analysis will be given in order to assist in understanding the physical demands forms.</p>

Points to be Made

A. Purpose of Job Analysis

What is the purpose of any job analysis?

B. The main points of technique in job analysis

- * (Ask what are some of the
- * key points in making a satisfactory job analysis?)

1. Observing the particular job

2. Breakdown of job into component tasks

a. Example: Major tasks of a receptionist

(Note on the board.)

3. The job analysis formula for each task: WHAT, HOW, WHY, and WHAT IS INVOLVED

a. Example of the receptionist

Suggested Supporting Material

A. The purpose of analyzing a job is to obtain a concise picture of the work being performed and to record it in a form that will convey to the totally uninformed reader that same pattern - a snapshot of the job.

B. Certain key points or principles for the making of job analyses carry over to the making of Physical Demands Analyses.

1. Jobs by the same title vary widely from place to place, and the tasks the worker will have to perform. Therefore, it is important to observe the particular job the worker is performing.

2. Any job includes a collection of tasks.

a. For example: the major tasks in the job of receptionist might be:

- (1) Receives and greets clients
- (2) Ascertains their wants
- (3) Directs them accordingly

3. Within each task in any job, a formula can be used to describe the job precisely in terms of what the worker does, how he does it, why he does it, and the skills, knowledge and abilities required to do it.

a. For example, the first task of the receptionist might be further analyzed into these terms:

- (1) WHAT - receives applicants
- (2) HOW - By greeting new arrivals verbally from behind a desk or counter
- (3) WHY - To direct visitors to the proper place and to prevent unwanted interruptions
- (4) WHAT IS INVOLVED - skill in meeting and dealing with people, pleasant manner, agreeable voice, and sufficient intelligence to discriminate among numerous possibilities without much close supervision

Any step or task in a job can be analyzed in the same manner.

Points to be Made	Suggested Supporting Material
<p><u>C. The job analysis form</u></p>	<p>C. On the job analysis form itself the summary of the job always presents in concise form the essential and distinguishing characteristics of the occupation.</p>
<p>*(Distribute sample job analysis schedules to point out that the summary section is provided for noting the tasks that make up a job.)</p>	<p>Its purpose is to provide a verbal picture of the job so clearly that any person can visualize the worker at his task and see clearly the important characteristics that differentiate this job from all other jobs.</p>
<p>1. Provision for noting unusual physical strains or unfavorable surroundings</p>	<p>It answers the questions of the job analysis formula, WHAT, HOW, WHY, and WHAT IS INVOLVED.</p>
<p>2. <u>Exercise No. 1: "Practice in Recording a Job Summary"</u></p>	<p>1. A job analysis study made for general purposes includes provision for noting any unusual physical strains in the job or any extremely unfavorable surroundings. Thus, <u>the physical demands analysis simply develops further an aspect of job analysis that has always been present.</u></p>
<p>* (Distribute the <u>Exercise Book</u>, and have the group turn to the first exercise.)</p>	<p>2. Exercise No. 1 has as its objective giving the trainees practice in analyzing a simple job and noting a job summary, as a basis for learning how to analyze the physical demands of jobs.</p>
<p>* (Ask the group to note a job summary for a receptionist whom they have recently seen at work.)</p>	<p>The description of the job of receptionist contained in the Dictionary of Occupational Titles and Codes reads as follows:</p>
	<p>"RECEPTIONIST - Receives clients or customers coming into an establishment, ascertaining the individual's wants and directs him accordingly; obtains caller's name and makes arrangements for him to see the desired person; directs or shows the caller to his destination in the establishment, keeps a record of name of callers, time of call, nature of business, and person called on. May make future appointments. May perform a variety of clerical duties, and other duties peculiar to the type of establishment, such as mounting pictures in frames in a photographic studio, or showing frames for glasses in an optician's office."</p>
	<p><u>Answers from the group should in general conform to this definition.</u></p>

Points to be Made

Suggested Supporting Material

PRESENTATION (Cont'd)

IV. The Physical Demands Analysis form

- * (Have the group turn to the
- * Physical Demands Analysis section, and leaf through.)

IV. The Physical Demands Analysis form, as stated, supplies the standard terminology with which to analyze the work capacity of people and the physical demands of jobs. It provides job analysts, employment interviewers, industrial personnel interviewers, and medical experts with standard defined terms which each understands. It provides them too with a standard, organized outline for noting the essential facts.

V. The Physical Demands Analysis form for a job

- * (Have the group turn to the
- * Physical Demands form for SACK SEWER in the Physical Demands Analysis section. It is reproduced on the following page for the instructor's convenience. Follow item by item through the instructions for filling in the form.)

V. Two forms are used - one for jobs and one for applicants. The standard Physical Demands form for analyzing a job will be considered first. Interviewers for the handicapped will often make their own Physical Demands analyses, and will need a complete understanding of the form.

A. The "Physical Activities" section

1. Activities the "elements"

2. Standard definitions of activities important

(The definitions are reproduced on page 20 of this outline for the convenience of the Instructor.)

a. "Write-in" spaces provided

A. The first important section of the form is "Physical Activities," listing 27 of the most common physical activities such as walking, lifting, seeing.

1. These are the basic "elements" of the analysis, in the same sense that the word "elements" is used in chemistry.

2. Also as in chemistry, an understanding of the nature of each element is required. Standard definitions for each activity accompany the Physical Demands form in the handbook.

Anyone working with the form must be fully acquainted with the standard definitions for the activities.

a. Three spaces are provided for writing in any other activities an analyst may encounter.

WAR MANPOWER COMMISSION
BUREAU OF MANPOWER UTILIZATION

Budget Bureau No. 11-2088.1
Approval Expires March 31, 1944

Division of Occupational Analysis and Manning Tables

PHYSICAL DEMANDS FORM

Job Title SACK SEWER (BARLEY HARVESTING) Occupational Code 3-11.10
Dictionary Title SACK SEWER, HAND
Firm Name & Address Z Ranch, Fresno, California
Industry Agriculture Industrial Code 0111
Branch Grain Farming Department Barley Harvesting
Company Officer Z Analyst X Date 7-15-43

PHYSICAL ACTIVITIES	
<input checked="" type="checkbox"/> 1 Walking	<input type="checkbox"/> 16 Throwing
<input type="checkbox"/> 2 Jumping	<input checked="" type="checkbox"/> 17 Pushing
<input type="checkbox"/> 3 Running	<input checked="" type="checkbox"/> 18 Pulling
<input checked="" type="checkbox"/> 4 Balancing	<input checked="" type="checkbox"/> 19 Handling
<input checked="" type="checkbox"/> 5 Climbing	<input checked="" type="checkbox"/> 20 Fingering
<input type="checkbox"/> 6 Crawling	<input checked="" type="checkbox"/> 21 Feeling
<input checked="" type="checkbox"/> 7 Standing	<input type="checkbox"/> 22 Talking
<input checked="" type="checkbox"/> 8 Turning	<input type="checkbox"/> 23 Hearing
<input checked="" type="checkbox"/> 9 Stooping	<input checked="" type="checkbox"/> 24 Seeing
<input type="checkbox"/> 10 Crouching	<input type="checkbox"/> 25 Color Vision
<input type="checkbox"/> 11 Kneeling	<input type="checkbox"/> 26 Depth Perception
<input checked="" type="checkbox"/> 12 Sitting	<input checked="" type="checkbox"/> 27 Working Speed
<input type="checkbox"/> 13 Reaching	<input type="checkbox"/> 28
<input checked="" type="checkbox"/> 14 Lifting	<input type="checkbox"/> 29
<input checked="" type="checkbox"/> 15 Carrying	<input type="checkbox"/> 30

WORKING CONDITIONS	
<input type="checkbox"/> 51 Inside	<input type="checkbox"/> 66 Mechanical Hazards
<input checked="" type="checkbox"/> 52 Outside	<input checked="" type="checkbox"/> 67 Moving Objects
<input checked="" type="checkbox"/> 53 Hot	<input type="checkbox"/> 68 Cramped Quarters
<input type="checkbox"/> 54 Cold	<input checked="" type="checkbox"/> 69 High Places
<input type="checkbox"/> 55 Sudden Temp. Changes	<input type="checkbox"/> 70 Exposure to Burns
<input type="checkbox"/> 56 Humid	<input type="checkbox"/> 71 Electrical Hazards
<input checked="" type="checkbox"/> 57 Dry	<input type="checkbox"/> 72 Explosives
<input type="checkbox"/> 58 Wet	<input type="checkbox"/> 73 Radiant Energy
<input checked="" type="checkbox"/> 59 Dusty	<input type="checkbox"/> 74 Toxic Conditions
<input checked="" type="checkbox"/> 60 Dirty	<input type="checkbox"/> 75 Working With Others
<input type="checkbox"/> 61 Odors	<input type="checkbox"/> 76 Working Around Others
<input type="checkbox"/> 62 Noisy	<input checked="" type="checkbox"/> 77 Working Alone
<input checked="" type="checkbox"/> 63 Adequate Lighting	<input type="checkbox"/> 78
<input checked="" type="checkbox"/> 64 Adequate Ventilation	<input type="checkbox"/> 79
<input checked="" type="checkbox"/> 65 Vibration	<input type="checkbox"/> 80

DETAILS OF PHYSICAL ACTIVITIES: Must work rapidly throughout ten hour day, repetitively filling and sewing a sack of barley approximately every $1\frac{1}{2}$ minutes. Turns, stoops, and grasps empty sack, placing it on hooks at mouth of grain chutes (15%). Lifts and bounces sack up and down during sack-filling process which weighs 100-125 pounds when full (25%). Grasps, lifts, and carries filled sack about three steps, walking with balance and care on moving, jerky, harvester platform (10%). Sits and sews filled sack by hand, working with rapid, dexterous movements of fingers, hands, and arms, pulling the twine tight with both hands and pushing sewn sack from platform on to sack chute (50%). Uses little sight during filling and sewing process, relying considerably on a combined sense of touch and muscular discrimination. Climbs eight-foot perpendicular ladder to and from harvester platform twice daily.

DETAILS OF WORKING CONDITIONS: Outside, in dry summer heat 95° - 115° F, on moving, jerky, platform of large harvester, riding about eight feet above the ground in a constant heavy dust of earth and straw particles, with virtually no contact with fellow workers (100%).

DETAILS OF HAZARDS: Possibility of hand cuts from large sharp needle (50%), of hernia from frequent lifting and carrying 100-125 pound sacks of barley (35%), of collapse due to rapid working pace and hot weather (100%), of bruises, sprains, and fractures from falling by slipping on loose ball-bearing-like grain on moving platform floor (50%), of slipping and falling from platform beneath harvester and being crushed to death (50%).

Points to be Made

3. Review of the definitions

- * (Ask members of the group
- * to read each definition aloud. After each one, ask what typical jobs usually involve the activity--noting the suggestions as shown at right.)

4. Exercise No. 2, "Distinguishing between definitions of different activities"

5. Entries in "Activities" section

Suggested Supporting Material

3. A reading of the definitions will provide the necessary basic information. Each activity can be illustrated on the board as follows:

<u>Activity</u>	<u>As in the job of</u>
1. Walking	Postman
2. Jumping	Delivery helper
3. Running	Baseball player
4. Balancing	Structural iron worker
5. Climbing	House painter
6. Crawling	Miner
7. Standing	Store clerk
8. Turning	Cook
9. Stooping	Shoe clerk
10. Crouching	Auto mechanic
11. Kneeling	Charwoman
12. Sitting	Chauffeur
13. Reaching	Stock clerk
14. Lifting	Librarian
15. Carrying	Messenger
16. Throwing	Rivet passer
17. Pushing	Porter
18. Pulling	Crane operator
19. Handling	Baker
20. Fingering	Radio assembler
21. Feeling	Mica inspector
22. Talking	Teacher
23. Hearing	Interviewer
24. Seeing	Inspector
25. Color vision	Textile grader
26. Depth perception	Truck driver
27. Working speed	Short order cook

4. Exercise No. 2 has as its objective the highlighting of the fine distinctions between the precise meanings of the definitions--distinctions that are sometimes lost in common usage.

5. The required entries are:

- a. "X" before each activity required by the job.
- b. "O" before those not required.

All activities are to be marked with an "X" or an "O".

The "X" will be used however slight the degree.

Points to be Made	Suggested Supporting Material
<p>6. Two kinds of variation in degree: frequency and intensity</p> <p>a. Variations in degree expressed under <u>"Details"</u></p> <p>7. Possible error from describing performance rather than the job itself</p> <p>a. Example of individual idiosyncracies</p>	<p>6. All activities will not be present in the same degree. They will vary in terms of frequency (called the "time-consuming factor"), in terms of intensity (called the "energy-consuming factor"), or in some combination of these two.</p> <p>a. An "X" is used before each required activity regardless of frequency or intensity. Under "Details of physical activities" further along in the form, the analyst makes specific comments concerning the frequency and the intensity of the required activities.</p> <p>7. The analyst must be sure that he records the <u>activities required by the job rather than those that happened to figure in the performance of an individual worker.</u></p> <p>a. For example, a certain ARC WELDER may use his sense of hearing to help him maintain the proper arc by listening to the hissing sound it makes. The job itself, however, does not require an ARC WELDER to hear. The important requirement is sight, to determine whether he has maintained the proper arc. Regardless of individual idiosyncrasy, therefore, hearing should not be noted as a required activity of a job as ARC WELDER.</p>
<p>B. <u>The "Details of Physical Activities" section</u></p> <p>1. Details of equipment and material minimized</p> <p>2. Association of activities as they naturally occur</p> <p>a. Example of a flow of related activities</p>	<p>B. In the section marked <u>"Details of Physical Activities"</u> the frequency and intensity factors of the required activities are to be noted. The relationships between activities are to be brought out here in a specific manner. A few major points serve as guides:</p> <p>1. Concentrate, as far as possible, on the physical activities required, and minimize any reference to details of equipment and materials.</p> <p>2. Since activities are rarely undertaken independently, it is not necessary to write up each item on the check list separately.</p> <p>a. For example, the worker does not <u>stoop</u> without doing something else such as <u>reach</u>. <u>Reaching</u> may in turn involve additional activities, completing the whole cycle of physical requirements for a single operation. Thus, in writing the details of</p>

Points to be Made

Suggested Supporting Material

b. Example of the paragraph of "Details of Physical Activities" for SACK SEWER, from Physical Demands Analysis section

- * (The instructor will
- * read through and comment on the paragraph with the group.)

3. Frequency of activities--
a percentage of time

4. Intensity of activities--
measurement of energy

- * (Read items "a" through
- * "g," asking the group to try to locate an instance of each in the paragraph on SACK SEWER.)

activities, the analyst should bring out an association and flow of activities, in order to give a complete picture of the physical requirements.

b. The paragraph for SACK SEWER reads:

"DETAILS OF PHYSICAL ACTIVITIES: Must work rapidly throughout ten hour day, repetitively filling and sewing a sack of barley approximately every $1\frac{1}{2}$ minutes. Turns, stoops, and grasps empty sack, placing it on hooks at mouth of grain chutes (15%). Lifts and bounces sack up and down during sack-filling process which weighs 100-125 pounds when full (25%). Grasps, lifts, and carries filled sack about three steps, walking with balance and care on moving, jerky, harvester platform (10%). Sits and sews filled sack by hand, working with rapid, dexterous movements of fingers, hands, and arms, pulling the twine tight with both hands and pushing sewn sack from platform on to sack chute (50%) Uses little sight during filling and sewing process, relying considerably on a combined sense of touch and muscular discrimination. Climbs eight-foot perpendicular ladder to and from harvester platform twice daily."

3. The approximate time consumed by each activity should be expressed in terms of a percentage of the total time spent on the job. The example for SACK SEWER shows such entries in parentheses.

4. The intensity of each activity will represent an attempt to measure the energy consumed in terms of either:

- a. The weight and size of objects lifted, carried, thrown, pushed, pulled and hauled;
- b. The distance walked, jumped, run, climbed and crawled;
- c. The acuity required in hearing, feeling, seeing, color vision, and depth perception;
- d. The dexterity required in fingering;

Points to be Made

Suggested Supporting Material

5. Special mention where one member only is required

6. Similarity to the Job Summary on the job analysis form

7. Items left blank for "write-ins"

- * (Ask the group if they
- * have any questions before proceeding to other sections of the form.)

C. The "Working Conditions" section

- * (Ask the group to read the
- * working conditions section on the Physical Demands form for SACK SLIVER.)

1. Review of the definitions

- * (For the convenience of
- * the instructor they appear in this outline on page 22.)

(Ask group to read each definition aloud, and have them mention a job that involves each and note them on the board.)

e. The direction and distance reached;

f. The qualities required in talking; or

g. The tempo required in working speed.

5. The form is based on the assumption that the activities require both hands or both legs. Whenever an activity requires only one member, that should be specifically stated in order to highlight the fact that one alone can do the job.

6. The similarity between this section on the Physical Demands form and the Job Summary section on the job analysis form is evident. Both attempt to give a concise picture of the job. The Physical Demands form goes a step further in that it attempts to show exactly what the job means in terms of physical effort.

7. Items 28, 29, and 30 were left blank for writing in other activities that might be observed.

C. The "Working Conditions" section of the form lists 27 of the most frequently occurring conditions that surround jobs, numbered from 51 to 77. Definitions for working conditions accompany the form and are to be found in the handbook. The interviewer must be fully familiar with each definition.

1. Again, the definitions give the necessary basic information. Some of the jobs that might be cited to typify each are:

<u>Working Condition</u>	<u>As in</u>
51. Inside	- Interviewer
52. Outside	- Lineman
53. Hot	- Boiler tender
54. Cold	- Ice box man
55. Sudden temperature changes	- Butcher
56. Humid	- Stoker on boat
57. Dry	- Dryer tender

Points to be Made

Suggested Supporting Material

Working Condition

As in

- | | |
|---------------------------|--------------------------|
| 58. Wet | - Fireman |
| 59. Dusty | - Cement Mixer |
| 60. Dirty | - Threshing hand |
| 61. Odors | - Chemist |
| 62. Noisy | - Boilermaker |
| 63. Adequate lighting) | - Varies with spe- |
| 64. Adequate ventilation) | cific job |
| 65. Vibration | - Riveter |
| 66. Mechanical hazards | - Drill press operator |
| 67. Moving objects | - Structural iron worker |
| 68. Cramped quarters | - Subway motorman |
| 69. High places | - Bridge worker |
| 70. Exposure to burns | - Welder |
| 71. Electrical hazards | - Electrician |
| 72. Explosives | - Dynamiter |
| 73. Radiant energy | - X-Ray technician |
| 74. Toxic conditions | - Chemist |
| 75. Working with others | - Social worker |
| 76. Working around others | - Stenographer |
| 77. Working alone | - Timber cruiser |

2. Exercise No. 3--"Distinguishing between definitions of different working conditions"

3. Entries in "Working Conditions" section

a. Time and danger expressed under "details"

2. Exercise No. 3 has as its objective the highlighting of fine distinctions between definitions of different working conditions.

3. The required entries are:

1. "X" before each working condition to which the worker is required to be exposed
2. "O" before each one to which the worker is not required to be exposed on the particular job

All activities are to be marked with an "X" or an "O".

a. The factors of both time and danger will be involved to a varying degree in each working condition required by the job.

Specific comments in this connection are reserved to be entered in the sections on "details of working conditions" and "details of hazards."

Points to be Made

D. "Details of Working Conditions" section

- * (Remind the group to
- * follow through on the sample form for SACK SEWER.)

1. The time factor for each working condition

2. The intensity factor

- * (Read aloud points "a"
- * through "i" at the right, and ask the group to mention illustrations of each from the Details of Working Conditions paragraph for SACK SEWER.)

E. The "Details of Hazards" section

- * (Again remind the group
- * to note the sample form.)

1. Purpose - to highlight harmful conditions

Suggested Supporting Material

D. No heading entitled "Details of Working Conditions" is printed on the Physical Demands form. It is to be written in after "Details of Physical Activities." This provision eliminates waste of space because the details of physical activities will vary considerably in length.

1. In this section you will specifically state the length of time the worker is exposed to the particular working condition, noting the time as a percentage of total time. The entries are made in parentheses at the end of the comment.

2. The intensity of the condition will be described as objectively as possible, using measures wherever feasible. The measures may be of the following kinds:

- a. The range (in degree) of high or low temperatures;
- b. The range (in degree) of sudden temperature changes;
- c. The kind of dust, dirt, odor, wetness, mechanical hazards, moving objects, exposure to burns, electrical hazards, explosives, radiant energy, or toxic conditions;
- d. The source of noise or vibration;
- e. Whether or not there is adequate lighting and ventilation;
- f. The size of cramped quarters;
- g. The height of elevated places;
- h. How much the worker works with others, around others, or alone;
- i. Any differences which may occur in the working conditions under different shifts.

E. Another heading, Details of Hazards, is to be added to the form by the analyst directly after the completed section on "Details of Working Conditions."

1. The purpose of this section is to point out the possibilities of injuries to the worker as a result of the hazards inherent in the physical activities and working conditions so that they may be avoided in placement.

Points to be Made	Suggested Supporting Material														
<p>2. Check list of possible injuries</p> <p>3. No attempt to predict degree of possible injury</p> <p>4. The time factor for hazards</p> <p>a. Usually corresponds to time of activities or of working conditions</p>	<p>2. The following list may serve as a guide for determining possible injuries:</p> <table border="0"> <tr> <td>a. Cuts</td><td>h. Impairment of sight</td></tr> <tr> <td>b. Bruises</td><td>i. Impairment of hearing</td></tr> <tr> <td>c. Burns</td><td>j. Occupational diseases</td></tr> <tr> <td>d. Sprains</td><td>k. Collapse</td></tr> <tr> <td>e. Hernia</td><td>l. Electric shock</td></tr> <tr> <td>f. Fractures</td><td>m. Sudden death</td></tr> <tr> <td>g. Loss of parts</td><td>n. Other</td></tr> </table> <p>3. The interviewer should make no attempt to express the degree of possible injury other than to state the length of time the worker is subject to the hazard. Others who use this information will determine the degree of possible injury as it concerns specific individuals.</p> <p>4. As in the previous sections, the time factor is expressed as a percentage, in parenthesis, at the end of each comment.</p> <p>a. As a rule, the percentage of time the worker is subject to injury from a physical activity will correspond to the percentage of time the worker is engaged in that activity as stated under <u>DETAILS OF PHYSICAL ACTIVITIES</u>. Likewise, the percentage of time the worker is subject to injury as a result of exposure to certain working conditions will correspond to the percentage of time the worker is exposed to that condition as stated under <u>DETAILS OF WORKING CONDITIONS</u>.</p>	a. Cuts	h. Impairment of sight	b. Bruises	i. Impairment of hearing	c. Burns	j. Occupational diseases	d. Sprains	k. Collapse	e. Hernia	l. Electric shock	f. Fractures	m. Sudden death	g. Loss of parts	n. Other
a. Cuts	h. Impairment of sight														
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d. Sprains	k. Collapse														
e. Hernia	l. Electric shock														
f. Fractures	m. Sudden death														
g. Loss of parts	n. Other														
<p>F. <u>Exercise No. 4--"Review of Physical Demands Form for PRODUCTION WELDER"</u></p> <p>* (Have the group turn to the</p> <p>* Physical Demands form for PRODUCTION WELDER on page 13 of the Physical Demands Analysis section. The form is attached for the convenience of the instructor.)</p>	<p>F. <u>Exercise No. 4 has as its objective assuring that the trainees understand the purpose of all the entries on the physical demands form.</u></p>														
<p>Summary and Transition:</p> <p>The Physical Demands Analysis form, then, is essentially an outline for noting the physical activities and working conditions involved in a job-- i.e., a Job Description in physical terms.</p>															

Points to be Made	Suggested Supporting Material
<p>I. <u>The Physical Capacities Appraisal form (using physical demands terminology)</u></p> <p>A. <u>The identical list of activities and conditions used</u></p> <p>B. <u>Filled out by cooperating physician, clinic, or hospital</u></p> <p>* (Have the group turn to * the Physical Capacities Appraisal form in the Physical Demands Analysis section. A copy is attached for the instructor's convenience.)</p> <p>C. <u>Entries indicate restrictions</u></p> <p>1. Checked items are those forbidden, to save doctor's time</p> <p>2. Entries reversed</p> <p>D. <u>Interviewer may have to fill out form</u></p> <p>1. Usually used as a check list only</p>	<p>VI.</p> <p>A. The identical list of physical activities and working conditions forms the basis for the Physical Capacities Appraisal form now recommended. Whenever the report can be obtained in these terms, the matching job of the placement interviewer is clearly expedited.</p> <p>B. The Physical Capacities Appraisal form must be filled in by a physician or hospital where possible when a medical report is desired for the proper placement of an applicant.</p> <p>C. To reduce the number of entries necessary, the physician is asked to indicate only the physical restrictions and environmental restrictions or, in other words, the activities and the conditions <u>forbidden</u> for the applicant.</p> <p>1. On a completed for the items <u>not</u> checked are the working conditions or activities that are <u>satisfactory</u> for the applicant. This plan saves the doctor's time and makes for better cooperation.</p> <p>2. The entries are thus the opposite of those on the Physical Demands form.</p> <p>D. When a medical report is not secured from a doctor or a hospital, the interviewer himself must note the physical and environmental restrictions for each handicapped applicant.</p> <p>1. He will probably make the entries directly on the application card, but the entries should be in terms of the physical demands terminology. Best practice requires that the entries correspond with the items that appear on the Physical Demands form so that the standard definition for <u>physical activities</u> and <u>working conditions</u> will clearly be indicated.</p>

Points to be Made	Suggested Supporting Material
<p>2. When applicant's diagnosis is evident</p> <p>3. Danger of attempting a diagnosis</p>	<p>2. In other words, the interviewer uses the items from the list as a <u>guide</u> for making his own notations when the applicant brings his own diagnosis of long-standing complaint with him, or when the medical report is not secured.</p> <p>3. At this point the interviewer must particularly guard against any tendency to diagnose the applicant's disability himself. <u>Diagnosis by an interviewer is never possible.</u></p>
<p style="text-align: center;"><u>APPLICATION</u></p> <p>I. <u>Exercise No. 5—"Physical Demands Analysis of a Common Job"</u></p> <p>* (Supply the group with copies * of the Physical Demands Analysis form for a job. Instruct them to <u>observe</u> carefully a job easily accessible in the neighborhood of the training session.)</p> <p>A. <u>Observation of one of two possible jobs</u></p> <p>B. <u>Survey of the key points of a good Physical Demands Analysis</u></p> <p>* (Review the key points * at the right with the group.)</p>	<p>(60 minutes)</p> <p>I. Exercise No. 5 has as its objective the application of the principles for making a physical demands analysis.</p> <p>A. The job of ELEVATOR OPERATOR, COUNTER MAN, SHOE SHINE BOY or NEWSSTAND ATTENDANT is usually readily at hand for observation.</p> <p>Definitely assign two among these jobs so that the results can be compared when the group returns.</p> <p>B. The key points to be remembered in preparing the forms are:</p> <ol style="list-style-type: none"> 1. Is the fundamental job analysis a sound one in that WHAT, HOW, WHY and WHAT IS INVOLVED is clearly stated for each task? 2. Are all the items covered by either an X or an O? 3. In the sections on <u>Details</u> is an effort made to express each item clearly in terms of its intensity? 4. Has an effort been made to estimate the percentage of time for each item?

Points to be Made	Suggested Supporting Material
<p>I</p> <p>C. <u>Time Allowed: 45 minutes</u></p> <p>* (While the group is observing the jobs agreed upon, the instructor will review the Dictionary definitions for the job chosen and himself prepare a satisfactory Physical Demands form for the particular jobs.)</p>	<p>5. Is the proper correspondence between the percentage of time for a working condition or a physical activity and the percentage of time for a hazard carefully maintained?</p>
<p>I. <u>Review of the Sample Physical Demands Analysis Forms</u></p> <p>* (Review with the group the details for each of the two jobs, stressing the key points of a good form. If the group is large, some analyses should be reviewed individually after the session.)</p>	<p>II. The same key points listed above should be checked as the forms are reviewed.</p>
<p><u>SUMMARY</u></p> <p>I. <u>Review of the advantages of the Physical Demands Analysis</u></p> <p>* (Elicit from the class a rapid review of the advantages of the physical demands analysis of both jobs and workers.)</p>	<p>I. Probable answers will be that the Physical Demands Analysis has the following advantages:</p> <p>A. Approaches objective treatment</p> <p>B. Minimizes the need for mention of physical disabilities</p> <p>C. Places emphasis where it belongs upon the physical and environmental aspects of the job rather than on the limitations of the applicant</p> <p>D. Provides a common link for use for the placement worker and the medical worker</p> <p>E. Emphasizes the fact that no job requires all of the physical and mental capacities of human beings.</p>

Points to be Made	Suggested Supporting Material
<p>II. <u>Reading of introductory section of handbook</u></p> <p>* (If time remains the group * might read Section I and Section II of the handbook to resurvey the points made during the day's discussion.)</p>	<p>II.</p>
<p>III. <u>Preparation for second day</u></p> <p>A. <u>Readings</u></p> <p>B. <u>Development of the GLOSSARY</u></p> <p>* (Distribute a supply * of blank 3x5 cards.)</p>	<p>III. Each day's discussion is necessarily based on information secured in advance.</p> <p>A. Ask the group to prepare for the discussion of the next day by reading the following sections in the handbook.</p> <p>Part II, Sections on <u>Hearing, Speech, and Orthopedic Disabilities.</u></p> <p>Part I, Section III, the <u>Application Process</u>, (omitting <u>Recognizing the Handicapped</u>) and Section V, <u>Preparing Applicants for Employment.</u></p> <p>Part I, Section I and Section II, if not already read as described above.</p> <p>B. Ask the group to note on 3x5 cards the new technical terms they encounter in the readings--in order to begin the development of a technical glossary. Mention that the use of the Medical Dictionary will be discussed in the next session.</p>

DEFINITIONS OF PHYSICAL ACTIVITIES

1. Walking - Moving about on the feet by taking alternate steps, setting one foot before the other without running.
2. Jumping - Projecting the body up, down, or horizontally through the air, primarily by the muscular action of the feet and legs.
3. Running - Moving rapidly by using the feet and legs more quickly than in walking.
4. Balancing - Walking, standing, or running on narrow or slippery elevated surfaces by maintaining body equilibrium to prevent falling.
5. Climbing - Ascending or descending ladders, scaffolding, poles, ropes, and the like, using hands and arms as well as feet.
6. Crawling - Moving about on the hands and knees or hands and feet.
7. Standing - Supporting oneself on the feet and legs in an upright or nearly upright position.
8. Turning - Twisting partly around, or revolving completely about a vertical axis, usually involving the spine, trunk, neck and legs.
9. Stooping - Bending the body downward and forward by bending the spine only.
10. Crouching - Bending the body downward and forward by bending the legs and spine.
11. Kneeling - Bending the legs at the knees to come to rest on the knees.
12. Sitting - Resting upon the haunches or lower or posterior extremities of the trunk as in occupying a bench, chair, saddle, etc.
13. Reaching - Extending the hands and arms in any direction.
14. Lifting - Raising or lowering an object from one level to another.
15. Carrying - Transporting an object, usually by holding it in the hands and arms.
16. Throwing - Propelling an object through space by swinging motion of the hand and arm with or without the use of tongs or other devices.
17. Pushing - Exerting force upon an object so that the object moves away from the force, including slapping, striking, kicking and treadle actions.
18. Pulling - Exerting force upon an object so that the object moves toward the force, including jerking.
19. Handling - Seizing, holding, grasping, turning or otherwise working with the whole hand or arm.

20. Fingering - Picking, pinching, or otherwise working with the fingers primarily, (rather than with the whole hand or arm, as in handling.)
21. Feeling - Perceiving such attributes of objects as size, shape, temperature or quality, by means of receptors in the skin, typically those of the finger tips.
22. Talking - Expressing or exchanging ideas by means of spoken word.
23. Hearing - Perceiving the nature of sounds by the ear.
24. Seeing - Perceiving the nature of objects by the eye.
25. Color Vision - Perceiving the color of objects by sight.
26. Depth Perception - Perceiving relative or absolute distances of an object from the observer or from one object to another.
27. Working Speed - Rate of speed of the job. Check only when job requires a significantly high rate of working speed.

NOTE: When activities involving the use of the hands and arms and the feet and legs require the use of but one hand and arm and but one foot and leg, the analyst is to make specific comments in this connection.

DEFINITIONS OF WORKING CONDITIONS

51. Inside - Indoor protection from weather conditions.
52. Outside - Out of doors, or under an overhead covering with slight protection from the weather.
53. Hot - Temperature sufficiently high to cause perceptible bodily discomfort.
54. Cold - Temperature sufficiently low to cause perceptible bodily discomfort.
55. Sudden Temperature Changes - Variations in temperature which are sufficiently marked and abrupt to cause perceptible bodily reactions.
56. Humid - Atmospheric conditions with moisture content sufficiently high to cause perceptible bodily discomfort.
57. Dry - Atmospheric condition with moisture content sufficiently low to cause perceptible bodily discomfort.
58. Wet - Contact with water or other liquids.
59. Dusty - Air filled with small particles of any kind such as textile dusts, flour, wood, leather, feathers, etc., and inorganic dust including silica and asbestos, which make the workplace unpleasant or are the source of occupational diseases.
60. Dirty - Contact with or exposure to dirt, litter, soiled materials, etc.
61. Odors - Perceptible smells, either toxic or non-toxic.
62. Noisy - Sufficient sound to cause thought distraction or possible injury to the sense of hearing.
63. Adequate Lighting - Sufficient lighting to minimize eye strain. (A zero before this item would indicate that the lighting is either insufficient or excessive. Explain under Details of Working Conditions.)
64. Adequate Ventilation - Sufficient ventilation to cause neither a feeling of suffocation nor exposure to drafts. (A zero before this item would indicate that the ventilation is insufficient or excessive. Explain under Details of Working Conditions.)
65. Vibration - Production of an oscillating or quivering movement of the body or strain on the muscles, particularly of the legs and arms, as from repeated motion, pressure, or shock.
66. Mechanical Hazards - Exposure to mechanical parts involving the risk of cuts, bruises, sprains, fractures, loss of parts, impairment of sight, or sudden death.
67. Moving Objects - Exposure to moving equipment and objects such as overhead cranes, hand and motor driven vehicles, falling objects, etc., which involve the risk of cuts, bruises, sprains, fractures, loss of parts, impairment of sight, or sudden death.

- 68. Cramped Quarters - Workplace where freedom of movement is restricted or where worker cannot maintain an upright position.
- 69. High Places - Workplace at an elevation above the floor or ground level from which it is possible to fall and be injured.
- 70. Exposure to Burns - Workplace involving the risk of being burned from hot materials, fire or chemical agents.
- 71. Electrical Hazards - Exposure to high-tension wires, transformers, bus-bars, or other uninsulated or unshielded electrical equipment which involves the risk of electric shock or sudden death.
- 72. Explosives - Exposure to explosive gasses, vapors, dusts, liquids, and substances which involve the risk of bodily injury or sudden death.
- 73. Radiant Energy - Exposure to radio-active substances (radium, uranium, thorium, etc.,) X-Rays, ultra-violet rays, or infra-red rays, which involve the risk of impairment of sight or general or localized disabling conditions.)
- 74. Toxic Conditions - Exposure to toxic dusts, fumes, gasses, vapors, mists or liquids which cause general or localized disabling conditions as a result of inhalation or action on the skin.
- 75. Working with others - Job requires occupational cooperation with fellow workers, or direct contact with the public.
- 76. Working around others - Job requires independent occupational effort but in proximity to fellow workers or the public.
- 77. Working alone - Job requires independent occupational effort and virtually no contact with fellow workers or the public.

WAR MANPOWER COMMISSION
BUREAU OF MANPOWER UTILIZATION

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Division of Occupational Analysis and Manning Tables

PHYSICAL DEMANDS FORM

Job Title PRODUCTION WELDER Occupational Code 4-85.020
Dictionary Title WELDER, ARC
Firm Name & Address General Motors Corporation, 2700 Tweedy Blvd., Los Angeles
Industry Ordnance & Accessories Manufacturing Industrial Code 1931
Branch Tanks, Manufacturing Department Welding
Company Officer F.G. Douglas Analyst Barry Fagin Date 7-15-43

PHYSICAL ACTIVITIES	
<input checked="" type="checkbox"/> 1 Walking	<input type="checkbox"/> 16 Throwing
<input type="checkbox"/> 2 Jumping	<input checked="" type="checkbox"/> 17 Pushing
<input type="checkbox"/> 3 Running	<input checked="" type="checkbox"/> 18 Pulling
<input checked="" type="checkbox"/> 4 Balancing	<input checked="" type="checkbox"/> 19 Handling
<input checked="" type="checkbox"/> 5 Climbing	<input type="checkbox"/> 20 Fingering
<input checked="" type="checkbox"/> 6 Crawling	<input type="checkbox"/> 21 Feeling
<input checked="" type="checkbox"/> 7 Standing	<input type="checkbox"/> 22 Talking
<input checked="" type="checkbox"/> 8 Turning	<input type="checkbox"/> 23 Hearing
<input checked="" type="checkbox"/> 9 Stooping	<input checked="" type="checkbox"/> 24 Sealing
<input checked="" type="checkbox"/> 10 Crouching	<input type="checkbox"/> 25 Color Vision
<input checked="" type="checkbox"/> 11 Kneeling	<input type="checkbox"/> 26 Depth Perception
<input type="checkbox"/> 12 Sitting	<input type="checkbox"/> 27 Working Speed
<input checked="" type="checkbox"/> 13 Reaching	<input type="checkbox"/> 28
<input checked="" type="checkbox"/> 14 Lifting	<input type="checkbox"/> 29
<input checked="" type="checkbox"/> 15 Carrying	<input type="checkbox"/> 30

WORKING CONDITIONS	
<input checked="" type="checkbox"/> 51 Inside	<input checked="" type="checkbox"/> 66 Mechanical Hazards
<input type="checkbox"/> 52 Outside	<input checked="" type="checkbox"/> 67 Moving Objects
<input type="checkbox"/> 53 Hot	<input checked="" type="checkbox"/> 68 Cramped Quarters
<input type="checkbox"/> 54 Cold	<input checked="" type="checkbox"/> 69 High Places
<input type="checkbox"/> 55 Sudden Temp. Changes	<input checked="" type="checkbox"/> 70 Exposure to Burns
<input type="checkbox"/> 56 Humid	<input type="checkbox"/> 71 Electrical Hazards
<input type="checkbox"/> 57 Dry	<input type="checkbox"/> 72 Explosives
<input type="checkbox"/> 58 Wet	<input checked="" type="checkbox"/> 73 Radiant Energy
<input type="checkbox"/> 59 Dusty	<input checked="" type="checkbox"/> 74 Toxic Conditions
<input type="checkbox"/> 60 Dirty	<input type="checkbox"/> 75 Working With Others
<input checked="" type="checkbox"/> 61 Odors	<input checked="" type="checkbox"/> 76 Working Around Others
<input checked="" type="checkbox"/> 62 Noisy	<input type="checkbox"/> 77 Working Alone
<input checked="" type="checkbox"/> 63 Adequate Lighting	<input type="checkbox"/> 78
<input checked="" type="checkbox"/> 64 Adequate Ventilation	<input type="checkbox"/> 79
<input checked="" type="checkbox"/> 65 Vibration	<input type="checkbox"/> 80

DETAILS OF PHYSICAL ACTIVITIES:

Stoops, grasps, lifts, and carries 40 pound pieces of armor plate (16" x 16" x 1") about 5 steps (10%). Pushes plates into steel jig, turning and reaching in all directions and pushing and pulling hand-operated clamping devices to secure plates in jig preparatory to welding (15%). Climbs and crawls about tank to place where welding is to be done (5%). When welding, crouches and kneels in awkward positions inside tank bodies (25%) and stands and kneels on tank tops (25%), being careful to keep balance. Holds electrode-holder in one hand and steadies its motion by resting hand on other arm during welding process (50%), maintaining proper arc by using sight to observe appearance of weld. Pushes and pulls arc welding generator to various desired locations and adjusts control knobs by hand (5%). Handles and uses a light chipping hammer, a portable grinder, a small slag hammer, and such small parts as bolts and brackets both inside and outside tanks (15%).

DETAILS OF WORKING CONDITIONS:

Works around others inside adequately lighted and ventilated tank plant (100%). Works in cramped quarters inside tank bodies (35%) and on tank tops ten feet above cement floor (30%). Exposed to odors of mildly toxic welding fumes (100%), to loud noises from chipping and grinding operations in plant (100%), to ultra-violet and infra-red radiation from electric arcs (100%), to sharp-edged steel parts and devices (100%), to hot metals and flying sparks (65%), to overhead cranes carrying tank parts (10%), and to vibration from small pneumatic chipping hammer (3%).

DETAILS OF HAZARDS:

Possibility of developing metal fume fever from mildly toxic welding fumes from manganese steel necessitating a few days sick leave (100%). When worker's welding hood is raised, possibility of receiving a "flash" of radiant energy from the electric arcs (from welding equipment of own or others) which "sunburns" the eyes and causes temporary blindness (100%). Possibility of injury to the hearing from loud noises (100%), of cuts from sharp edges of steel parts and devices (100%), of burns from hot metals and flying sparks (65%), of injury from overhead cranes (10%), and of bruises, sprains, hernia, and fractures from slipping and falling from tank tops (30%).

Instructor's Discussion Outline

USE OF OTHER OCCUPATIONAL INFORMATION TOOLS IN PLACEMENT OF THE HANDICAPPED

Objective: To acquaint interviewers with the specific uses to be made of occupational information tools (both National and local) in interviewing and referring handicapped workers.

Outline of Main Points:

1. Relation of the physical demands analysis to other occupational tools (5 minutes)
2. Brief review of the use of occupational information tools by any interviewer (10 minutes)
3. Occupational information tools as aids in choosing the field of work (50 minutes)
4. Assigning a classification (20 minutes)
5. Summary of the use of the outline (5 minutes)

Unit 2-a
Second Morning

REMINDERS FOR THE INSTRUCTOR

Special Advance Preparation: The instructor will want to refresh his acquaintance with the items listed below for use in the session.

- Materials Needed:
1. Supply of the "Dictionary of Occupational Titles and Codes, Volume I" for each trainee
 2. Supply of the National Job Description Volume entitled "Job Machine Shops" for each trainee
 3. Supply of the new 5x8 inch Job Description cards for HOT BENDER III
 4. Supply of a complete listing of new 5x8 inch Job Descriptions available from the Washington headquarters for each trainee
 5. Supply of "Special Aids for Placing Navy and Army Personnel in Civilian Jobs" for each trainee
 6. Supply of bulletins on Utilization of Persons Having Physical Limitations
 7. Supply of a sample Job Family for each trainee
 8. Supply of complete sets of the available National Physical Demands Studies for each trainee

Points to be Made	Suggested Supporting Material
<u>MOTIVATION</u> (15 minutes)	
I. <u>Relation of the Physical Demands Analysis to the other occupational information tools</u> (5 minutes)	<p>I. The Physical Demands Analysis just studied represents the further development or specialized refinement of a body of information and a set of techniques which is part of the professional equipment of all workers in a public employment service program.</p> <p>This body of information and technique is a set of occupational information tools developed by the USES in its extensive national research program conducted continuously since the establishment of a unified national service in 1933.</p>
A. <u>A specialized development of job analysis</u>	<p>A. As the discussions have already demonstrated, the Physical Demands Analysis method is a specialized refinement or extension of the more fundamental job analysis technique.</p> <p>Accordingly, physical demands technique can be applied only on the basis of a thorough understanding of the job analysis method.</p>
B. <u>Other occupational information tools useful to the interviewer for the handicapped</u>	<p>B. While the physical demands technique and the specific studies of jobs made in terms of physical demands analysis are the most directly useful to the interviewer for the handicapped, he can also make extensive use in his job of all the other materials developed as part of the occupational information program.</p>
II. <u>Review of the use of occupational information by any interviewer</u> (10 minutes)	<p>II. The interviewer for the handicapped necessarily starts from the same basis as any other interviewer in using occupational tools.</p>
<p>* (Ask the group what direct uses an interviewer can make of occupational information tools, and list the suggestions on the board.)</p>	
A. <u>Classification the most immediate problem</u>	<p>A. The most direct use of occupational tools is in connection with assigning a classification and code to a worker. The Dictionary of Occupational Titles is used in this process.</p>
B. <u>Conversion of skills</u>	<p>B. Still another use of occupational tools receiving considerable attention at present is that for the conversion of skills developed in experience in one occupation to fill needs in another.</p>

Points to be Made	Suggested Supporting Material
C. <u>Formulation of meaningful questions in interviewing</u>	<p>The importance of full use of occupational information to extend the search for vitally needed skills to meet war time demands has high-lighted their usefulness in recent months.</p>
D. <u>Formulation of meaningful questions for order-taking and other employer contacts</u>	<p>C. Another important use for occupational information is for guiding the interviewer's formulation of questions to applicants during the interview. When the interviewer is acquainted with the basic elements of jobs mentioned as part of the applicant's work history, he can focus attention along the particular items of information that bear directly on placement. Without an acquaintance with the elements of the job, the interviewer would not know what questions to ask.</p>
E. <u>Vocational Guidance</u>	<p>D. Similarly, the same background of occupational information aids the interviewer in formulating the questions he asks in taking an order.</p> <p>The same data about jobs provides the interviewer with a solid basis for discussion with employers on any occasion, such as the field visit or a discussion of a statement of availability.</p> <p>E. The interviewer for the handicapped moreover needs the facts about jobs as the basis for the guidance which is part of his job.</p>

PRESENTATION (80 minutes)

I. <u>Use of occupational information tools in choosing the general field of work</u> (60 minutes)	<p>I.</p> <p>A. The process of matching the physical capacities of a handicapped applicant with the physical demands of jobs actually starts with assigning the proper classification to the worker. The assigning of that classification represents the summation of all the considerations of the interview.</p> <p>1. While the process of arriving at a classification for a handicapped worker is the same as that for any worker in its essential elements, the considerations</p>
<p>A. <u>Classification the immediate practical problem</u></p> <p>1. Process more extensive than that for ordinary applicant</p>	

Points to be Made	Suggested Supporting Material
<p>2. Special considerations necessary</p> <p>B. <u>Special need for wide information on occupations</u></p> <p>* (Ask the group why the interviewer for the handicapped has a special need for extensive occupational information)</p> <p>1. Danger of limiting applicant's possibilities</p> <p>2. Straight job analysis the first step</p> <p>3. Physical demands analysis the next step</p> <p>C. <u>Source of the necessary occupational information</u></p> <p>* (Ask the group to give the source of the occupational information and list them on the board)</p>	<p>are often somewhat more extensive in that the interviewer must devote more time to a preliminary survey of the general field of work which the applicant's remaining work capacity enables him to perform.</p> <p>2. Within that general field of work, the interviewer often exercises considerable creative thought to arrive at a particular job classification or even a particular job opening wherein the applicant's work capacity will match the physical demands of the opening.</p> <p>B. When an interviewer for the handicapped has before him an applicant with a particular work capacity he must review in his mind the physical demands of a wide variety of jobs in order to arrive at a classification. He must therefore know them thoroughly, or he must be able to explore them quickly and readily.</p> <p>1. Unless the interviewer's occupational information about jobs is constantly widening, there is a real tendency to limit the possibilities in terms of the limitations of the interviewers knowledge. Stated more simply, the interviewer cannot consider a handicapped applicant for jobs whose physical demands he himself does not know. A too extensive knowledge of the elements of jobs in physical demands terms is thus impossible.</p> <p>2. The basic need is for information about the basic elements of jobs, their operations, and processes involved in them.</p> <p>3. Beyond this basic data, as previously discussed, the interviewer needs to translate the facts about the job into physical demands the job makes of the workers.</p> <p>C. List of the sources of occupational information for the use of interviewers for the handicapped should include:</p> <ol style="list-style-type: none"> 1. First-hand information and experience, constantly gathered from field visits and observation 2. Information secured from interviewing applicants and talking with employers 3. Definitions in the "Dictionary of Occupational Titles" as a start

Points to be Made	Suggested Supporting Material
<p>D. <u>How to use the Dictionary as a source of occupational information</u></p> <ul style="list-style-type: none"> * (Ask the group what general use they can make of the Dictionary for occupational background.) 	<ol style="list-style-type: none"> 4. The National Job Description Volumes 5. The recent 5"x8" Job Descriptions (and Interviewer Aid) cards 6. The special aids for placing military personnel in civilian jobs 7. The job families 8. The national and local physical demands studies 9. Bulletins on Utilization of Persons Having Physical Limitations
<p>E. <u>How to use the National Job Description volumes as a source of occupational information</u></p> <ul style="list-style-type: none"> * (Distribute the job description volume of Job Machine Shops for April 1938. Review the table of contents on page iv with the group and then allow them to leaf through the volume.) * (Refer the group to the description of ASSEMBLER on page 11.) 	<p>D. Volume I of the Occupational Dictionary is itself a readily available and compact source of a minimum of occupational information about jobs. It can be used as a starting point for considering what jobs are suitable for an applicant with a given work capacity.</p> <p>E. A source of occupational and industrial information which is available in every employment office in the country is that contained in the National Job Description Volumes prepared by the USES.</p> <p>The Job Machine Shop volume released in 1938 is an example of these basic reference tools that has had immediate war application.</p> <ol style="list-style-type: none"> 1. A review of the table of contents shows the features included in a job description volume. 2. One of the most useful items in the job description volume is the introductory section describing the industry and its processes or procedure (page xiii - 1). The photographs and diagrams are sufficiently detailed to provide even a layman with an acquaintance with machine shop practice. 3. One example will serve to illustrate how each job description can be used by an interviewer for the handicapped. The description for ASSEMBLER on page 11 would give a good start towards understanding the physical demands of the ASSEMBLER job. The pictures reflect some of the activities the job requires such as <u>crouching</u>, and <u>handling</u>. Working conditions are noted in detail in each definition, as are hazards.
<p>F. <u>How to use the recent 5x8 job description cards</u></p>	<p>F. The job description volumes were primarily reference tools. More recently job description cards measuring</p>

Points to be Made	Suggested Supporting Material
<p>1. Physical demands specifically included</p>	<p>5"x8" have been prepared and released for jobs important to war production. These become basic desk tools for the interviewer to guide his questioning of applicants and employers and to assist him in treating the job wherever he comes in contact with it.</p>
<p>(Distribute 5"x8" job descriptions for HOT BENDER III.)</p> <p>a. HOT BENDER III exemplifies the kind of information these new job descriptions include.</p>	<p>1. Being more recent, the new 5"x8" job descriptions include specific mention of physical demands of the job as well as specific description of work conditions and hazards.</p>
<p>* (Ask group to turn to * "Physical Demands" section of this job description. Read and discuss.)</p>	
<p>2. Survey of all available 5"x8" descriptions recommended</p>	<p>2. An interviewer for the handicapped can make a good start toward an acquaintance with the physical demands of important war jobs by studying all the available 5x8 job descriptions and analyzing them for his own applicants.</p>
<p>G. <u>How to use "Special Aids for Placing Navy and Army Personnel in Civilian Jobs"</u></p>	<p>G. Still another source of occupational information, the "Special Aids for Placing Navy and Army Personnel in Civilian Jobs," released by the National Headquarters in September 1943.</p>
<p>1. Nature of the aids</p> <p>(Distribute copies of the "Special Aids for Placing Navy Personnel in Civilian Jobs.")</p>	<p>1. These aids are essentially lists of civilian jobs that are closely related to the principal Army and Navy ratings, with explanation of the physical demands of each.</p>

Points to be Made	Suggested Supporting Material
<p>2. Example of their use for handicapped veterans</p>	<p>2. One example would show how the aids could be used to determine if the physical demands and working conditions of the job opening are probably suitable for a Navy man with a physical limitation. For a man with a rating of "Hospital Apprentice, First Class," page 109 of the special aids lists the related civilian occupations.</p> <p>If the applicant had been injured in the back and shoulders and was limited in his ability to do any lifting, the interviewer must locate the civilian jobs that involve little or no lifting.</p> <p>The section on physical activities and working conditions gives information similar to that reviewed for a physical demands form.</p>
<p>H. <u>How to use the bulletins on Utilization of Persons Having Physical Limitations as a source of occupational information</u></p> <p>1. The special H- series for the physically handicapped</p> <p>2. Example: #H-16, Occupations in FIREARMS MANUFACTURER</p> <p>(Distribute copies of the sets of bulletins for the handicapped and refer group to item H-16)</p>	<p>H.</p> <p>1. The National Headquarters has prepared a special series of bulletins listing occupations suitable for the employment of persons having specified physical limitations.</p> <p>These group common limitations into eleven categories and cross reference groups of jobs in certain industries to show where applicants with particular limitations can perform them.</p> <p>2. As an example of such a bulletin, that for FIREARMS MANUFACTURER describes on page 1 the general limitations within which the material is to be used, pages 2, 3, and 4 describe the categories of handicaps, pages 5, 6, and 7 list the jobs and refer to their suitability for applicants with each of the eleven common handicaps.</p>
<p>I. <u>How to use job families as a source of occupational information</u></p> <p>1. Nature of occupational and industrial job families</p>	<p>I. The review of materials in the ordinary job families will sometimes suggest occupations related to a handicapped applicant's former employment that do not involve the particular element of work capacity that he has lost through his disability. Detailed review of the elements of both jobs concerned is necessary to verify whether or not the lost element of work capacity can be dispensed with in the related job.</p>

Points to be Made	Suggested Supporting Material
<p>J. <u>Use of oral trade questions to aid in placing physically handicapped</u></p> <ol style="list-style-type: none"> 1. Used more widely for handicapped than non-handicapped 2. Give more information concerning experience and aid in convincing employer of qualifications <p><u>Summary:</u> Thus, the occupational information available from the National Headquarters or developed in the state can be used as tools by the interviewer for the handicapped.</p> <p>K. <u>Physical demands information in aptitude test batteries</u></p> <ul style="list-style-type: none"> * (Mention only in states where test batteries are in use.) 	<p>J.</p> <ol style="list-style-type: none"> 1. In order to aid in the selection of applicants with physical limitations for referral to jobs, oral trade questions should be used for physically handicapped workers even when there is no doubt concerning the applicant's occupational classification. 2. The results of administering a set of oral trade questions may provide the interviewer with additional information concerning the applicant's experience and may aid in convincing an employer that the physically handicapped person does have trade information which is possessed by other expert workers in the particular occupation. <p>K. An additional aid for the selection of learners with physical limitations is provided by the inclusion of physical demands information in aptitude test batteries now issued. This information will serve as an aid in determining whether or not applicants possess the necessary physical requirements for the occupation for which they are being considered.</p>
<p>II. <u>Choosing the proper classification and code</u></p> <p>A. <u>The importance of individual consideration in classification</u></p>	<p>II. After a full survey of possibilities among broad fields of work, using his resources of occupational information, the interviewer must arrive at a specific classification and code.</p> <p>A. The importance of insistence that the skills and abilities of a handicapped worker must be evaluated on an individual basis has already been stressed.</p> <p>All individuals with the same handicap cannot be classified in the same limited group of occupations because the remaining work capacity, even of workers who have the same handicap, varies over a wide range</p>

Points to be Made	Suggested Supporting Material
B. <u>Remaining individual work capacity the basis of classification</u>	Specifically, all one-legged men need not be watchmen nor all blind men broom makers, rug makers or piano tuners. The impossibility of canned lists of occupations for each type of handicap must be understood.
C. <u>Basis of classification</u> * (Ask the group upon what basis the determination is best made.)	B. Since few handicaps cause the elimination of more than a fraction of an individual's total abilities, the interviewer's problem in classification is the accurate evaluation of the remaining work capacity. <u>What is left, not what is gone, is the key to correct classification.</u>
1. Former experience the first criterion	C. Choosing suitable work for the handicapped is based on the same factors as choosing suitable work for any worker. The factors to be considered are his experience, his training, his aptitudes and his interests, all of which make up his remaining work capacity and are not nullified by the physical limitation.
2. Even remote experience may be helpful	1. As in any placement, one of the most important factors in selecting a suitable occupation for a handicapped applicant is capitalizing upon his previous experience. He should be led, <u>if possible, to the occupation followed prior to the disability.</u>
3. Former job may lead to related work	2. If the recent job is no longer suitable, the applicant <u>may return to a line of work performed years previously.</u> Items of work history, when analyzed carefully, often show previous jobs that can be used for the basis of present classifications.
D. <u>Assignment of specific titles and codes</u>	3. The <u>job family technique may be utilized</u> to discover jobs related to the former occupation which will utilize the remaining work capacity, and at the same time not require the element, eliminated by the disability, that prevents his returning to his former job.
	D. Finally, in order to make the handicapped applicant readily available for selection and referral to job openings, occupational titles and codes must be assigned him from part II or part IV of the Dictionary which covers the entry occupational groupings.

Points to be Made

Suggested Supporting Material

1. Primary classification the occupation for which the applicant is best fitted
2. Federal practice requires primary classification in usual occupation

1. As for any applicant, primary classification should reflect the occupation for which he is best generally fitted. Additional classifications should be assigned when abilities not sufficiently covered by the primary classification make it desirable to have the applicant considered for other occupations.
2. The USES Manual, Section 2520 on Classification Problems, specifies the following:

"The applicant who is no longer able to perform in his usual occupation because of age or physical condition shall be assigned a primary classification in his usual occupation with an additional classification or classifications for a different kind of work, provided he is competent to perform it. If no specific classification from Part I can be assigned as an additional classification, the applicant shall be assigned an entry classification."

This policy is based on the reasoning that in the interests of uniform classification practice the usual occupation provides the best base for finding out what the applicant can actually do through job family or other techniques.

SUMMARY

I. Reiteration of need for a broad occupational background

A. USES occupational information the nucleus

B. Interviewer's local studies

I. The interviewer for the handicapped has the same need for an extensive occupational background as has any interviewer. Over and beyond this basic information, however, he needs further detailed and organized knowledge concerning the physical demands of as many jobs as possible in order to match the work capacity of his applicants to those physical demands on as broad a basis as possible.

A. The occupational information available for national and state publications of the employment service provides the nucleus of the necessary information.

B. Interviewers can continuously develop their own professional background in occupational information through the physical demands studies they make of local jobs.

Points to be Made

Suggested Supporting Material

- II. Classification of the handicapped a reflection of their work capacity, not their limitations

Transition: The occupational information needed by an interviewer for the handicapped constitutes one half of the technical information he needs to do his job. The other half is information concerning the vocational effect of handicaps on work capacity. The following sessions will be devoted to those facts.

- II. The basis of classification of handicapped workers, like the basis of classification for any worker, is what he can do.

Training Program for Serving the Handicapped
Unit 2-b

Second Morning (continued) and Second Afternoon
(5 hours)

Instructor's
Discussion Outline

VOCATIONAL ASPECTS OF COMMON DISABILITIES:

(1) HEARING AND SPEECH, and (2) ORTHO-
PEDIC DISABILITIES.

Objective: To introduce an analytic approach to the exact occupational significance of some of the most widespread disabilities, by presenting physical data about hearing and speech deficiencies and orthopedic disabilities (from the Handbook), and showing how these facts should be used in interviewing and referring.

- Outline of Main Ideas:**
1. Review of the necessity for additional techniques for placing the handicapped (15 minutes)
 2. Explanation of the Interviewer's need for physical facts as to the precise limitations on the individual's work capacity, so that he can match them with the precise physical demands of a certain job (15 minutes)
 3. The Deaf - (45 minutes)
 - a. Physical facts about the deaf, as distinct from the hard of hearing
 - b. Application of the physical facts about the deaf to actual problems in interviewing and classifying
 - c. Matching their work capacity with physical demands
 4. The hard of hearing - (85 minutes)
 - a. Physical facts about the hard of hearing
 - b. Application of the physical facts about the hard of hearing to actual problems in interviewing and classifying
 - c. Matching their work capacity with physical demands
 5. Workers with speech handicaps - (35 minutes)
 - a. Physical facts about speech disabilities
 - b. Application of physical facts about speech disabilities to interviewing, classifying, and referring such workers
 - c. Matching their work capacity with physical demands
 6. Presentation of the extent of orthopedic disability in the population (5 minutes)
 7. Arm and Hand disabilities - (40 minutes)
 - a. Physical facts
 - b. Application of these physical facts to problems in interviewing and classifying workers
 - c. Matching their work capacity with physical demands

8. Leg and foot disabilities - (45 minutes)
 - a. Physical facts
 - b. Application of these physical facts to problems of interviewing and classifying workers
 - c. Matching their work capacity with physical demands
9. Back and spinal disabilities - (35 minutes)
 - a. Physical facts
 - b. Application of these physical facts to problems of interviewing and classifying workers
 - c. Matching their work capacity with physical demands

REMINDERS FOR THE INSTRUCTOR

Unit 2-b

Second Morning (continued) and Afternoon

Special Advance Preparation

A demonstration interview with an applicant with a hearing disability is used as an exercise applying the points presented in this section. The instructor should be prepared to act as the applicant, using the facts as presented in Exercise No. 7 on page 15.

The instructor should be acquainted with the local agencies available as sources of technical information, and assistance to those with hearing, speech, and orthopedic handicaps.

Materials Needed

1. Supply of blank 5x8 cards on which the group will develop its own Interviewer's Aids (check lists of key points to be asked and recorded for each disability)
2. Supply of blank application cards, for use by the trainees in completing Exercise No. 7 on page 15
3. Supply of copies of the Medical Dictionary ("The American Illustrated Medical Dictionary", by W.A. Newman Dorland, 18th Edition, W.B. Saunders Co., Philadelphia, 1940) or ("The American Pocket Medical Dictionary", by W.A. Newman Dorland, 17th Ed., W.B. Saunders and Co., Philadelphia, 1942)
4. Supply of 3x5 cards for the trainees to use in developing a glossary of unfamiliar medical terms

Points to be Made	Suggested Supporting Material
<u>TRANSITION AND MOTIVATION</u>	
<p>I. <u>Review of the basic tool: The Physical Demands Analysis</u> (10 minutes)</p> <p>*(Elicit from the group a rapid *listing of the points in the last discussion as below.)</p> <p>A. <u>Uses of Physical Demands Analysis</u></p> <p>* What are the uses an inter- * viewer can make of it?</p> <p>B. <u>Its advantages</u></p> <p>*(Ask what are the ad- *vantages of using this type of analysis?)</p>	<p>I. The Physical Demands Analysis Form and how it may be used as a basic tool has already been discussed</p> <p>A. The Physical Demands Analysis can be used for:</p> <ol style="list-style-type: none"> 1. Determining the details of physical activities and working conditions a job demands - which we abbreviate in the term, <u>Physical Demands</u>. 2. Establishing clearly the physical activities and environmental conditions suitable for each applicant, which we abbreviate in the term, <u>Work Capacity</u>; 3. Matching these two sets of facts together to assure that a particular job is suitable for an individual applicant. <p>B. Some of the advantages of the method are that it:</p> <ol style="list-style-type: none"> 1. Approaches <u>objectivity</u> of treatment. 2. Stresses <u>capacity</u>, rather than his <u>limitations</u>. 3. Places <u>emphasis</u> on physical and environmental aspects of <u>job</u> rather than on <u>handicap</u>. 4. Provides a <u>common language</u> to be used by the job analyst, the personnel worker, and the doctor. 5. Should serve to <u>insure better matching</u> of men and jobs. 6. <u>May be used for the aged, the young, and women, as well as the physically and the mentally handicapped.</u>

Points to be Made	Suggested Supporting Material
	<p>7. <u>Demonstrates that there is no job that requires all the physical and mental capacities of human beings for successful performance.</u></p>
<p><u>The kind of additional information needed; Physical facts on work capacity (20 minutes)</u></p> <p>A. <u>"Selective placement" - the use of special additional methods</u></p> <p>B. <u>Review of applicants requiring this additional treatment</u></p> <p>*(Elicit from the group and list on the board, to review the points made earlier)</p> <p>C. <u>Physical facts on work capacity needed for such applicants</u></p> <p>*(Ask what information *an interviewer must have about disabilities to do this job)</p>	<p>II.</p> <p>A. We have established an understanding of what specialists in work with the handicapped mean by "selective placement" - the matching of additional information about the exact nature and extent of work capacity and the precise physical demands of jobs.</p> <p>B. We can define in fairly simple terms the applicant group whose needs require this special degree of careful treatment.</p> <p>An applicant is "handicapped" for placement purposes when he has a permanent or long-lasting condition presenting a deficiency, peculiarity, or impairment which:</p> <ol style="list-style-type: none"> 1. Requires the applicant to <u>modify or change his occupation.</u> 2. Makes it more difficult for the applicant to <u>secure employer acceptance</u> for suitable employment. 3. Requires special consideration to prevent the applicant from undertaking work likely to <u>aggravate the disability</u> or cause him to <u>jeopardize the health or safety of others.</u> 4. <u>Restricts the opportunities</u> of an inexperienced applicant for entering industry, trade, or profession. <p>C. These are the applicants for whom careful "selective placement" is necessary.</p> <p>And "Selective Placement" involves:</p> <ol style="list-style-type: none"> (1) using the exact physical analysis we are now studying, for both the applicant and the job and, (2) a body of technical facts about the nature of the disability the interviewer will most frequently encounter, with emphasis on the occupational significance of those facts.

Points to be Made	Suggested Supporting Material
<p>1. Constant need for an expanding technical background</p>	<p>1. The information necessary to serve the handicapped intelligently develops with experience. Interviewers must acquire and continuously add to a background of technical information about physical and mental disabilities and the work capacities of people with these disabilities</p>
<p>III. <u>Sources of such information</u> (30 minutes)</p> <p>A. "Selective Placement for the Handicapped" - 1943</p> <p>*(Ask what some of the other sources are)</p> <p>B. <u>The Medical Dictionary</u></p> <p>*(Distribute dictionaries and have group thumb through pointing out a few definitions, such as the one for <u>poliomyelitis</u> and for <u>nystagmus</u>)</p> <p>1. Use as a basis for translating medical language to job language</p> <p>2. Development of a MEDICAL GLOSSARY as a learning aid</p> <p>(Distribute a supply of 3x5 cards to each trainee on which to note definitions of unfamiliar terms)</p>	<p>III.</p> <p>A. Part II of "Selective Placement for the Handicapped" serves as a beginning in this direction. The material presented does not begin to cover every type of disability found under each heading nor does it give every ramification possible. Its limitations are recognized and interviewers are urged to supplement that information by other sources.</p> <p>B. A modern medical dictionary, such as the "American Illustrated Medical Dictionary" is an important part of the equipment of any interviewer working with handicapped applicants. Both its definitions and its pictures will contribute to his background of technical knowledge.</p> <p>1. Unfamiliar terms, especially those appearing in medical reports, can be located in the dictionary. The definitions provide a clue to the vocational aspects or occupational significance of the conditions.</p> <p>Interviewers for the handicapped have found the development of their own glossaries of unfamiliar medical terms a practical way to master them.</p> <p>In the course of these discussions and of the readings, trainees will find it helpful to note such terms on 3x5 cards and to obtain and write the definitions. When the cards are pooled and alphabetized at the end of the course each interviewer will have a glossary for reference, and will have at least partly learned the terms for his future use.</p>

Points to be Made	Suggested Supporting Material
<p>C. <u>Technical reading</u></p> <p>*(Have group turn to the end of handbook and point out some of the available material and where it may be found)</p> <p>D. <u>Sources of technical information in the community</u></p> <p>*(Ask what local agencies might be of help as sources of information)</p>	<p>C. A list of technical work in the field will be found in the Bibliography at the end of the handbook.</p> <p>D. In addition, community agencies are often equipped to cooperate with interviewers as sources of technical information. Some sources in this community may be the Tuberculosis and Health Association, the Cardiac Clinics, and others.</p>
<p>IV. <u>The aim of the discussions of medical facts in these sessions</u> (10 minutes)</p> <p>A. Limited survey of highlights from the handbook</p> <p>B. <u>Best possible training: Knowing where to turn for an exact answer</u></p> <p>1. Impossibility of covering complete technical information in these sessions.</p> <p>C. <u>Emphasis on the vocational meaning of physical facts</u></p> <p>1. "What can the worker do?" - <u>the main idea.</u></p>	<p>IV.</p> <p>A. For the next three days, we will be considering the facts about the most common disabilities, as summarized in Part II of the handbook. Our <u>discussions</u> will be subject to the same limitations that were mentioned for the handbook itself: - they <u>cannot be considered exhaustive.</u></p> <p>B. Many questions will occur both in the course of these sessions and in your subsequent work to which we will not have answers, <u>because we are not physicians or psychiatrists.</u></p> <p>1. During the sessions the instructor will make every possible effort to obtain sound answers to questions that come up, but if the trainees leave the sessions with a good idea of where to look for the technical facts they need - whether in the Medical Dictionary or through a medical society, or in a book - the main purpose will have been achieved.</p> <p>C. In every case as we examine the physical data about a handicap, we will be asking ourselves "What do these medical descriptions <u>mean</u> in job-language?"</p> <p>1. "What precisely can the worker do?" (In general what are the vocational implications, or aspects of the particular disability) is the main idea to work with.</p>

Points to be Made	Suggested Supporting Material
<p>D. <u>Use of the facts in interviewing, classifying, and referring workers</u></p> <p>E. <u>Caution against any attempt at diagnosis.</u></p> <p>1. Appraisal of remaining work capacity the interviewer's function</p>	<p>D. As we trace through each disability, we will develop the best methods, or key points, for interviewing such workers, classifying them, and referring them to suitable jobs if possible, or to other sources of help where necessary.</p> <p>E. <u>No employment interviewer is ever, in a position to diagnose a disability.</u> The information we will discuss cannot in any sense make medical authorities of interviewers - nor is that its purpose.</p> <p>1. <u>The proper function of the interviewer is the appraisal of the remaining work capacity.</u> Often he may have to work without the benefit of medical diagnoses.</p>

PRESENTATION

<p>I. <u>The most common disabilities</u> (5 minutes)</p> <p>*(Ask what some of the physical and the mental handicaps that occur most frequently are. List on the board as the group mentions them)</p>	<p>I. Job-seekers may be handicapped by any of the ills the flesh is heir to, but experience points to a comparatively few categories of disability into which most handicapped applicants fall. Some of these are</p> <p style="margin-left: 40px;">Orthopedic disabilities Vision losses Hearing Losses Heart diseases Arrested Tuberculosis Speech defects Hernia, ulcers Nervous and mental disorders</p>
<p>***</p> <p>II. <u>Elements needed for placement of any handicapped worker</u> (5 minutes)</p> <p>*(Ask what you need to know to do a placement job for the handicapped. List items on the board as the group mentions them)</p> <p>A. <u>The physical facts, from two sources:</u></p> <p>1. Information obtainable in the interview: - Key points to look for</p>	<p>II. Whenever an applicant with one of these disabilities wants a job, certain points concerning the disability are essential to the placement interviewer to work with. These show the occupational significance of the handicap and guide the interviewer in his work, with such applicants.</p> <p style="margin-left: 40px;">In general, these are:</p> <p>A. The physical facts or the characteristics of the handicap, from two sources:</p> <p>1. The information the applicant can give in the interview (and how to get it from him, including the items to look for or observe), and</p>

Points to be Made	Suggested Supporting Material
<p>2. Medical reports</p> <p>B. <u>What to record</u></p> <p>C. <u>How to classify</u></p> <p>D. <u>Matching work capacity and physical demands</u></p> <p>E. <u>Sources of help for unemployable</u></p> <p>* Summarize: Consideration will be given to all these points in turn for each of the most common disabilities. Hearing loss and speech defects will be taken first since they are the easiest to understand.</p>	<p>2. a medical report from a doctor when desirable</p> <p>B. What to record about each handicap to make a useable picture for placement purposes.</p> <p>C. How to classify such an applicant, in light of his specific work capacity (as shown by the interview and or the medical report)</p> <p>D. How to match work capacity and physical demands, in order to effect a placement.</p> <p>E. How to direct such an applicant to other sources of training or rehabilitation if he is not immediately employable</p>
<p>III. <u>Consideration for uncovering any Non-visible handicap</u> (15 minutes)</p> <p>* (Ask for some suggestions that may help in disclosing any handicap? List on the board as the group mentions items)</p> <p>A. <u>Careful phraseology</u></p> <p>B. <u>4F's in Draft Classification</u></p> <p>C. <u>Health Agency record</u></p> <p>D. <u>Examination of reason for special classes</u></p>	<p>III. Hearing defects are often in the category of non-visible handicaps. Certain points of technique will help the interviewer to disclose a non-visible handicap.</p> <p>Some of these (not necessarily in order of importance) are the following:</p> <p>A. Careful phraseology of the question concerning physical condition, such as "Is there any work you cannot do because of your physical condition?" "Could you pass a very rigid physical examination?"</p> <p>B. Questioning of applicants classified 4F by Selective Service or those rejected for jobs because of physical examination to determine whether a handicap exists.</p> <p>C. Determine the reason for an applicant's contact with a health agency if such contact is indicated.</p> <p>D. Determine the reason for attendance at any special classes, such as, sight conservation, lip reading, speech correction, ungraded, etc.</p>

Points to be Made	Suggested Supporting Material
<p>E. <u>Disparity between age and school grade</u></p> <p>F. <u>Lack of athletic interest</u></p> <p>G. <u>Loss of job because of illness</u></p> <p>H. <u>Long unemployment or frequent change</u></p> <p>I. <u>Unexplained refusal of certain types of work</u></p> <p>J. <u>Work below intellectual</u></p> <p>**Summary: Any invisible handicap such as hearing impairment or cardiac disability will require special scrutiny of some of these points.</p>	<p>E. Illness or mental deficiency may be indicated if an applicant was substantially older than the average at the time of graduation from public school or if he had to repeat grades in school.</p> <p>F. A physical handicap may be indicated in a young applicant if he had no athletic interest in school or had limited gym classes.</p> <p>G. A physical disability may be indicated if an applicant states that he left a job because his work was too heavy or because of absence due to illness.</p> <p>H. A disability may be indicated if the applicant has been unemployed for an unusually long period of time or has changed jobs frequently.</p> <p>I. A handicap may exist if an applicant refuses some particular kind of work or expresses a definite preference.</p> <p>J. Persons working below apparent intellectual capacity may have an invisible handicap such as arrested tuberculosis, hearing impairment, or mental or neurological disorder.</p>
<p>IV. <u>The differences between the two categories of hearing cases</u> (15 minutes)</p> <p>*(Survey rapidly the material in the handbook, drawing as much as possible from the group's recollection of their reading.)</p> <p>A. <u>Hearing losses the result of disease or injury to the ear or auditory nerve</u></p> <p>B. <u>Speech usually affected</u></p>	<p>IV. You will recall from the section on hearing in Part II of the handbook that hearing handicaps are a frequent problem.</p> <p>First, let us consider the nature of hearing losses in general.</p> <p>A. The ear is a delicate mechanism of three parts - outer ear for catching sound, middle ear for conducting it, and inner ear for perceiving sound - served by the auditory nerve to the brain. Any of these can sustain damage.</p> <p>B. Speech is affected in most cases of hearing loss. This is easily understood when we realize that speech is learned in the first place by imitating sounds which we hear. Also there is tone and volume of voice change if we cannot hear clearly what we are saying.</p>

Points to be Made	Suggested Supporting Material
<p>1. Example: Trying to speak against a loud noise</p> <p>C. <u>The technical difference between the deaf and the hard of hearing</u></p> <p>1. <u>The Deaf; no functional hearing, from birth or since infancy.</u></p> <p>a. Speech always affected</p> <p>b. Some speak mechanically; the oralists</p> <p>c. Some use sign language</p> <p>d. Others write only</p> <p>e. Many read lips</p> <p>2. <u>The Hard of Hearing - onset after speech, (with some functional hearing left)</u></p> <p>3. <u>Exercise No. 6 - "Demonstrating the difference between the deaf and the hard of hearing"</u></p> <p>(Have a trainee read the examples and determine whether the applicant in each case is <u>deaf</u> or <u>hard of hearing</u>.)</p>	<p>1. Consider your own experience when you try to speak in competition with a very loud noise. You cannot hear your own voice. You do not know the tone of it. In general, the less the degree of hearing, the more the speech is affected.</p> <p>C. People with hearing losses are known as the Deaf or the Hard of Hearing. The technical meaning for each of these terms has become important to handicapped individuals themselves and must thus be understood by interviewers.</p> <p>1. The Deaf have no functional hearing at all. A deaf person may be born that way or lose his hearing at a very early age (before 4 or 5 years) <u>before acquiring a vocabulary.</u></p> <p>a. The deaf cannot hear their own voices at all. Speech, if present, is always affected.</p> <p>b. Some of the deaf have learned to speak mechanically and are called "oralists".</p> <p>c. Some communicate by means of sign language.</p> <p>d. Others communicate in writing.</p> <p>e. Some individuals in each group may have learned to understand the speech of others by observing their lips in motion. They are called "lip-readers".</p> <p>2. The hard of hearing include those deafened <u>after learning to speak</u>, who can still speak although their voices may have changed. Most of the hard of hearing have some functional hearing left. They perceive sounds by means of hearing aids or loud speaking. They may also be lip readers.</p> <p>3. The following examples illustrates the difference</p> <p>a. Girl of 20, had pneumonia when 8 years old. Wears hearing aid. condition chronic and progressive. Speaks in a low voice but clearly. (<u>Answer: Hard of Hearing</u>)</p>

Points to be Made	Suggested Supporting Material
	<p>b. Man age 50, worked 30 years as boilermaker. Has not been able to hear at all for the last 15 years. Cannot use hearing aid. Speaks in loud tones. (Answer: Hard of Hearing)</p> <p>c. Man, age 25, hearing loss began with meningitis at 3 years of age, Reads lips fairly well; speech difficult to follow except for stray word now and then. Answers most questions by writing. (Answer: Deaf)</p>
<p>V. <u>Physical facts about the deaf</u> (15 minutes)</p> <p>A. <u>Range of abilities as wide as that of persons with normal hearing</u></p> <p>B. <u>Good vocational training opportunities for the deaf</u></p> <p>1. Extensive trades training</p> <p>C. Employer enthusiasm</p> <p>D. <u>Possible psychological difficulties, growing out of isolation</u></p> <p>1. Illustration: experience under hair dryer in beauty shop</p>	<p>V. Turning now to a consideration of the totally deaf, we find a strong example of a disability that need <u>not</u> be an occupational handicap.</p> <p>A. The deaf, like the hearing, vary widely in mechanical and motor ability and they compare favorably with the hearing in mechanical aptitude as well as in native intelligence.</p> <p>B. Fine schools for the deaf exist throughout the country. Many deaf people, especially the younger group, have learned to speak and lip-read in these schools. In addition, the schools have equipped them with a good vocational background.</p> <p>1. Many have learned such trades as printing, tailoring, shoemaking, wood workings, commercial art, drafting, machine operating, millinery, typing, and cooking.</p> <p>C. Employers who once try well trained deaf workers are enthusiastic and call for more. There are 111 deaf workers at the Ford River Rouge Plant.</p> <p>D. The deaf as a group may tend to be sensitive, suspicious, and to feel themselves slighted or ridiculed. The hearing person can understand that if he pictures how lonely he would be if he could not hear the everyday sounds to which he is accustomed.</p> <p>1. Beauty parlor example: Recalling the experience of isolation felt when under hair dryer in a beauty shop will serve to demonstrate this feeling to any woman interviewer.</p>

Points to be Made	Suggested Supporting Material
<p>2. Many individual exceptions</p> <p>3. Emphasis on individual differences</p> <p>**(Ask what can be learned from these exceptions?)</p> <p><u>Possibility of other handicaps</u></p> <p>1. Combination of Handicaps always possible</p>	<p>2. Not all the deaf, of course, present this psychological reaction, so the interviewer must constantly be aware of individual differences.</p> <p>3. This point brings out a principle that is hard to overstress in placing the handicapped: <u>always analyze the particular individual, because generalizations about the disability are misleading.</u></p> <p>E. The interviewer should not overlook the possibility of other handicaps such as tuberculosis, stomach ulcers, varicose veins, and other conditions in addition to deafness.</p> <p>1. The same caution holds true for any handicaps.</p>
<p><u>I. What is involved in interviewing the deaf</u> (20 minutes)</p> <p>A. <u>Getting the information</u></p> <p>1. From the applicant</p> <p>*(Ask what the major difficulty is)</p> <p>a. Methods of communication slow</p> <p>b. Lip-reading</p> <p>*(Ask how you can help the lip-reader understand what you are saying)</p>	<p>VI. The problems of interviewing such workers can be solved by an understanding of the characteristics just reviewed.</p> <p>A. Once the fact of hearing limitation is established, the major difficulty lies in getting the information from the individual.</p> <p>a. Interviewing the deaf is generally a slow process because of the slow methods of communication necessary. It is extremely important to <u>phrase questions simply and carefully</u> in order to elicit the necessary information in the least amount of time.</p> <p>b. The lip-reader may be assisted by the following points:</p> <ol style="list-style-type: none"> (1) Face the light so that it shows clearly on your lips. (2) Look directly at the applicant rather than down or away. (3) Speak slowly but naturally and enunciate clearly. (4) Don't mouth words, because it is a hindrance rather than a help. (5) If the applicant has trouble understanding a word, repeat the entire

Points to be Made

Suggested Supporting Material

2. From medical reports only if another handicap is present

B. Recording the information -

Introduction of the Interviewing aid.

1. The significant points

*(Distribute application cards to each trainee.

Ask them to listen to the descriptions of two applicants in turn, and note what they consider the key points about each.)

(*Have the group read their answers, and discuss the reasons for putting down each point.

From the responses obtained above, ask the group to conclude the significant points, to be recorded for all deaf applicants and list on the board.

The group should then prepare a 5x8 card as INTERVIEWING AID for the deaf, noting in the key points at the right.)

2. Where information should be recorded: "Handicap", "Special information", and "Box B"

sentence or rephrase the thought. A hard of hearing person gets most of the meaning from the content.

- (6) Make sure the applicant understood all instructions (concerning referral, etc.) or advice, by having him repeat the thought for you.

2. Medical reports are not needed unless there is some handicap present other than the hearing loss, such as arrested tuberculosis, cardiac, or others for which a medical report is normally desired.

B. Recording the additional information on the application card is the next point of technique to be discussed.

1. A few examples will bring out the kind of information we want to record about an applicant with a hearing limitation.

Example a: A boy 22 years old, congenitally deaf, must communicate by writing and sign language, and has difficulty reading lips only understanding short, simple phrases. Uses only very simple language in the interview.

Example b: Girl, 17, deaf due to scarlet fever at 2 years of age, reads lips, good command of writing English, speech slightly hard to understand, no athletic interests because of heart condition.

From these examples, we can conclude that the key points for deafness are:

- (1) Congenital, or causes by disease
- (2) If disease, at what age?
- (3) Read Lips? How well? Oralizes - How Well?
- (4) Written English satisfactory?
- (5) Any other handicaps?

2. Section 12, on the front of the application card (Handicap) should read "Deaf".

Points to be Made	Suggested Supporting Material
<p>3. Style of recording: two separate paragraphs</p>	<p>The section on "special information" on the back should contain such recordings as examples given above.</p> <p>Box B on the card should be tabbed a distinctive color.</p> <p>3. To increase the usefulness of the notations on the card the best practice is to note the purely descriptive items (using the INTERVIEWER'S AID as a check-list) in one paragraph, and the interviewer's recommendations as to suitable work in another paragraph.</p>
<p>II. <u>Matching the work capacity of the deaf with the physical demands of jobs (10 minutes)</u></p> <p>A. <u>Trade or skill the determining factor</u></p> <p>B. <u>Physical Demands analysis will show dangers</u></p> <p>1. Sound warnings not safe</p> <p>C. Immunity to sound distractions</p> <p><u>Transition:</u> These are some of the more important points to consider for the deaf. The hard of hearing will now be examined in the same way.</p>	<p>VII. Determining work capacity and suitable working conditions for the deaf is the same as for any other handicapped worker.</p> <p>A. Placement will depend largely upon the skill which the deaf person has acquired. Skills taught them at their specialized schools are such that they do not require speech or hearing.</p> <p>B. If the interviewer has used the physical demands approach in the application process to note down what the applicant <u>can</u> and <u>cannot</u> do, he can subject the job opening to the same scrutiny, and specifically match work capacity with the physical demands.</p> <p>1. The interviewer should check exposure to mechanical hazards which have only auditory warnings of danger.</p> <p>C. The deaf have been particularly satisfactory in jobs where the amount of noise might be distracting to hearing persons.</p>

Points to be Made	Suggested Supporting Material
<p>VIII. <u>Physical facts about the Hard of Hearing (10 minutes)</u></p> <p>A. <u>Wide individual variations</u></p> <p>B. <u>Speech involvement possible</u></p> <p>C. <u>Other handicaps possible</u></p> <p>D. <u>Occasional reluctance to acknowledge handicaps</u></p> <p>E. <u>Possible personality problems similar to those of the deaf</u></p>	<p>VIII. The hard of hearing, as distinct from the totally deaf, present similar problems, but their situation is sufficiently different to warrant separate consideration.</p> <p>A. Great individual differences are found among the hard of hearing, both concerning the nature and extent of their handicap, and of their working capacity.</p> <p>The degree of hearing loss will vary greatly from applicant to applicant, and may affect one or both ears.</p> <p>B. Speech may or may not be affected. Some hard-of-hearing persons tend to speak in a low voice, some in a whisper, some with a flat expressionless tone some, of course, normally.</p> <p>C. The possibility of other physical handicaps, such as cardiac condition or tuberculosis, should not be overlooked.</p> <p>D. Some hard of hearing workers are not aware of or do not wish to admit their disability and therefore present additional problems in placement.</p> <p>E. Some develop personality problems similar to those of the deaf. Difficulty of adjustment to the handicaps seems to increase with the age of onset of the hearing loss.</p>
<p>IX. <u>What is involved in interviewing the hard of hearing (20 minutes)</u></p> <p>A. <u>Getting the information</u></p> <p>1. <u>From the applicant</u></p> <p>a. Procedure same as for the deaf</p>	<p>IX.</p> <p>A.</p> <p>1.</p> <p>a. Some hard of hearing applicants may not admit or know of their difficulty. If in doubt, the interviewer can determine by covering his lips as he speaks, or by bending his head down. If an impairment is evident, to facilitate a successful interview the interviewer should follow the same procedure for speaking</p>

Points to be Made	Suggested Supporting Material
<p>b. Importance of hearing aid</p> <p>(1) Variations in efficiency of aids</p>	<p>b. Hearing aids can restore a good measure but perhaps not all of a person's hearing ability. Aids are subject to mechanical failure at times (the battery goes dead, or the cord breaks), causing an impression that the wearer does not benefit from his aid.</p> <p>(1) The interviewer, in order not to misjudge the applicant, should question him closely as to how much service he gets from his aid. How well it serves him for conversational purposes is gauged in the interview itself. How well it serves him for sound heard from a distance may be evaluated by his answer to the question "Can you use your aid in the movies?" "How far back can you sit?"</p>
<p>2. <u>From medical reports wherever disease is involved</u></p> <p>Note on the board the entries from the sample Physical Capacities Appraisal forms for William F., and Henry K., and discuss them with the group.</p> <p>a. Doctor to mark the negative elements</p> <p>b. Use the Medical Dictionary to translate the diagnosis</p> <p>(Have trainees look up the diagnosis in the two samples)</p> <p>c. Remarks often directed to working conditions</p>	<p>2. When hearing loss is due to disease, a medical report may be secured, in physical demands terminology whenever possible.</p> <p>If not on this form, the report should at least show the prognosis or probable future course.</p> <p>Two sample medical reports, (see next two pages) in physical demands terminology, will serve to bring out the kind of medical facts the placement worker needs to know about the hard of hearing.</p> <p>a. The doctor can use the form to mark the activities and the working conditions that are <u>not</u> advised for the worker.</p> <p>b. Frequently the interviewer will have to consult the Medical Dictionary in order to understand the diagnosis given.</p> <p>c. In the "Specific Remarks" section, the details of working conditions and activities to be avoided can be noted. The more informed the examining physician concerning job situations, the more helpful these remarks can be.</p>

SAMPLE NO. 1

WAR MANPOWER COMMISSION

Budget Bureau No. 11-R088.1
Approval Expires March 31, 1944

BUREAU OF MANPOWER UTILIZATION

Division of Occupational Analysis and Manning Tables

PHYSICAL CAPACITIES APPRAISAL

Name William E. Age Sex Height Weight

PHYSICAL ACTIVITIES	
1 Walking	16 Throwing
2 Jumping	17 Pushing
3 Running	18 Pulling
4 Balancing	19 Handling
5 Climbing	20 Fingering
6 Crawling	21 Feeling
7 Standing	22 Talking
8 Turning	X 23 Hearing
9 Stooping	24 Seeing
10 Crouching	25 Color Vision
11 Kneeling	26 Depth Perception
12 Sitting	27 Working Speed
13 Reaching	28
14 Lifting	29
15 Carrying	30

WORKING CONDITIONS	
51 Inside	X 66 Mechanical Hazards
52 Outside	67 Moving Objects
53 Hot	68 Cramped Quarters
54 Cold	69 High Places
X 55 Sudden Temp. Changes	70 Exposure to Burns
X 56 Humid	71 Electrical Hazards
57 Dry	72 Explosives
X 58 Wet	73 Radiant Energy
X 59 Dusty	74 Toxic Conditions
60 Dirty	75 Working With Others
61 Odors	76 Working Around Others
62 Noisy	77 Working Alone
63 Adequate Lighting	78
64 Adequate Ventilation	79
65 Vibration	80

DETAILS OF PHYSICAL ACTIVITIES: Blank space = Full capacity; / = Partial capacity;
X = No capacity.

May lift, carry, handle, push or pull up to pounds per hour
 May engage in activities numbered up to 2/3 of work period
 May engage in activities numbered up to 1/3 of work period
 Sight:
 Hearing:
 Others:

DETAILS OF WORKING CONDITIONS:

Diagnosis: Catarrhal otitis media

Prognosis: Guarded - chronic

Specific Remarks: May work in noisy surroundings but should not use hearing aid then. 55, 56, 58, 59 should be avoided because of possible colds. Very loud bell or lights needed on machine he uses.

Date 194 Physician



AMPLE NO. 2
Use Medical Dictionary

WAR MANPOWER COMMISSION
BUREAU OF MANPOWER UTILIZATION

Budget Bureau No. 11-2088.1
Approval Expires March 31, 1944

Division of Occupational Analysis and Manning Tables

PHYSICAL CAPACITIES APPRAISAL

Name Henry K. Age Sex Height Weight

PHYSICAL ACTIVITIES	
1 Walking	16 Throwing
2 Jumping	17 Pushing
3 Running	18 Pulling
4 Balancing	19 Handling
5 Climbing	20 Fingering
6 Crawling	21 Feeling
7 Standing	22 Talking
8 Turning	X 23 Hearing
X 9 Stooping	24 Seeing
10 Crouching	25 Color Vision
11 Kneeling	26 Depth Perception
12 Sitting	27 Working Speed
13 Reaching	28
14 Lifting	29
15 Carrying	30

WORKING CONDITIONS	
51 Inside	66 Mechanical Hazards
52 Outside	67 Moving Objects
53 Hot	68 Cramped Quarters
54 Cold	X 69 High Places
X 55 Sudden Temp. Changes	70 Exposure to Burns
X 56 Humid	X 71 Electrical Hazards
57 Dry	72 Explosives
X 58 Wet	73 Radiant Energy
X 59 Dusty	74 Toxic Conditions
60 Dirty	75 Working With Others
61 Odors	76 Working Around Others
X 62 Noisy	77 Working Alone
63 Adequate Lighting	78
64 Adequate Ventilation	79
65 Vibration	80

DETAILS OF PHYSICAL ACTIVITIES: Blank space = full capacity; / = Partial capacity;
X = No capacity.

May lift, carry, handle, push or pull up to pounds per hour
May engage in activities numbered up to 2/3 of work period
May engage in activities numbered up to 1/3 of work period
Sight:
Hearing:
Others:

DETAILS OF WORKING CONDITIONS:

Diagnosis: Purulent labyrinthitis (Inner ear disturbance)

Prognosis: Poor

Specific Remarks: No noisy surroundings. May find bending head over work all day uncomfortable. Occasional dizzy spells - avoid high place. Has no hearing aid but might benefit by one. Electrical hazard need be avoided only if he is wearing a hearing aid and the hazard might damage it.

Date 194

Physician

Points to be Made

Suggested Supporting Material

- d. Interviewers may have to supply all job-implications
- e. Medical reports may not be obtainable

- d. In many cases, however, the interviewer himself will have to draw from the diagnosis all the implications with regard to jobs.
- e. In this connection, it should be recalled that the Employment Service must extend placement services to the worker even if he will not or cannot obtain a medical report.

Moreover, in many communities, medical reports will not be obtainable, and in such situations the interviewer must work on the basis of his own best appraisal of the applicant's capacity.

Recording the Information

B.

1. The significant points

- *(Have the trainees develop an INTERVIEWING AID for the Hard of Hearing during this discussion.)

- 1. When an applicant is hard of hearing, the important points are slightly different from the key entries for the deaf

For the hard of hearing they are:

- (1) Cause
- (2) Age of onset, prognosis
- (3) Type (inner, middle ear, etc.)
- (4) Extent of impairment
- (5) Uses an aid? How well does it work?
- (6) Conditions to be avoided
- (7) Reads lips? Does speaker have to raise voice? How much?

2. Where information should be recorded

- 2. These points should be noted in "Special Information", just as for the deaf. A tab in Box B to denote a handicap, and a notation "hard of hearing" in item 12 are also required.

3. Style the same as for any handicap

- 3. As for any handicap, a paragraph of recommendations should follow the descriptive comments.

RECESS FOR LUNCH

Points to be Made	Suggested Supporting Material
<p style="text-align: center;"><u>PRESENTATION (Continued)</u></p> <p>X. <u>Matching the work capacity of the hard of hearing to the physical demands of jobs.</u> (15 minutes)</p> <p>A. <u>The Physical Demands Form the key</u></p> <p>B. <u>Wide Variations in Work Capacity</u></p> <p>What are some of the variations?</p> <ol style="list-style-type: none"> 1. Some avoid damp 2. Some avoid noise 3. Abilities vary <p>C. <u>Possibilities for mechanical aids on the job</u></p> <p>D. <u>Principles of classification</u></p>	
<p>I. <u>Assisting the hard of hearing applicant to become employable</u> (5 minutes)</p> <p>A. <u>Organizations for the hard of for aid</u></p>	<p>X.</p> <p>A. A Physical Demands analysis will form the basis for matching what a hard of hearing applicant <u>can do</u> with what a given job requires.</p> <p>B. Great variations occur among the hard-of-hearing in relation to their hearing losses and the conditions under which they can work.</p> <ol style="list-style-type: none"> 1. You will recall from reading the handbook that those with hearing losses due to sinus or catarrh should possibly avoid dampness, humidity and great temperature variations. 2. Persons with nervous deafness find noise very irritating. Noisy surroundings may be perfectly suitable for middle ear impairments but highly undesirable for persons with nerve deafness or otosclerosis. This group finds noise very fatiguing. 3. There will be much variation in native ability and previously acquired skills among the hard of hearing as among persons without losses. <p>C. In addition to hearing aids, there are many ways of minimizing a hearing loss. Telephones anywhere in the nation can be equipped with amplifiers. In some cases incoming calls can be signaled by flashing lights rather than by a bell. Similarly, lights can often be substituted for warning bells on machinery.</p> <p>D. The hard of hearing, like all applicants, must be classified to reflect the full range of their useable skills.</p> <p>XI.</p> <p>A. If an applicant is not ready for work because he lacks a skill or his handicap needs to be</p>

Points to be Made	Suggested Supporting Material
<p>B. <u>The Vocational Rehabilitation agency for training</u></p>	<p>reduced he may be referred for the reduction of the handicap to the Vocational Rehabilitation Service or other organization for the hard of hearing. They will extend advice on the type of hearing aid to secure, test hearing and offer classes for lip reading</p> <p>B. He may be referred for training to the usual training classes in the community or to the Vocational Rehabilitation Agency.</p>
<p>XII. <u>Exercise No. 7 - "Demonstration Interview for a Hearing Handicap" (35 minutes)</u></p> <p><u>Transition and Summary:</u> As will become evident in the other discussions this week, this same pattern of approach can be used to examine the data about any disability, and to survey their application to interviewing and placing such workers.</p> <p>The next general group of disabilities we will consider are those of speech.</p>	<p>XII. Exercise No. 7 has as its objective the application of principles for interviewing, and high-lighting the best points of technique.</p>
<p>XIII. <u>Physical facts about speech disabilities (5 minutes)</u></p> <p>A. <u>Definition:</u> Any unfavorable characteristic which diverts attention</p> <p>B. <u>Causes:</u> <u>Organic or emotional</u></p> <p>C. <u>Poor motor coordination sometimes involved</u></p>	<p>XIII. Defects of speech may be sufficiently serious to constitute a handicap.</p> <p>A. Speech defects have been defined as "any speech characteristics which unfavorably divert the attention of the listener from the speech of the speaker."</p> <p>B. These defects may arise from organic faults, such as cleft or deformed palate, hare lip, tenseness of chest muscles as in some forms of spastic paralysis, etc., or from emotional disturbances which result in stuttering</p> <p>C. Some speech defects reflect poor motor coordination and the interviewer should question and observe the applicant further.</p>

Points to be Made	Suggested Supporting Material
<p>XIV. <u>Interviewing workers with speech disabilities</u></p> <p>A. <u>Getting the information</u></p> <p>1. <u>From the applicant</u></p> <p>a. Importance of ease</p> <p>b. Simple questions with brief answers</p> <p>2. <u>Medical reports not necessary</u></p> <p>B. <u>What to record</u></p> <p>(Elicit from the group the key points about speech defects that should be recorded for such worker, and have them note the facts on another INTERVIEWING AID.)</p>	<p>XIV. With speech difficulties, the interview is a particularly important source of data.</p> <p>A.</p> <p>1. Communication is again a problem</p> <p>a. If the speech defect is stuttering, stammering, or other impairments due to nervousness, the interviewer should make every effort to put the applicant at ease. An applicant with speech handicap such as stuttering is under a nervous strain at the employment office.</p> <p>b. The interviewer can start with simple questions that can be answered with brief statements. He should not appear impatient or pressing. He will usually find the applicant responding with less difficulty as the interview continues.</p> <p>2. Speech defects are sufficiently obvious not to require medical reports unless other handicaps are present.</p> <p>B. <u>The key points to be recorded about all workers with speech defects</u> are the following:</p> <p>1. Nature of the defect</p> <p>2. Cause - (whether organic, emotional or the like)- <u>if the applicant volunteers this information.</u></p> <p>3. Accompanying nervous manifestations where present - (grimaces, fluttering of hands, etc.)</p>
<p>XV. <u>Matching the work capacities of workers with speech handicaps with physical demands of jobs.</u> (5 minutes)</p>	<p>XV. The factors to be matched for speech defects are likewise fairly obvious. Clearly a person with seriously impaired speech should not be referred to jobs which require rapid, constant talking, or frequent contact with many new people.</p>

Points to be Made	Suggested Supporting Material
<p>A. <u>Public contact jobs generally not suitable</u></p>	<p>A. For example, a girl who stammers should probably not be guided into work as sales girl, receptionist, or telephone operator. She will do much better as a file clerk, bookkeeper,, or machine operator where constant talking or frequent contact with new people is not required.</p>
<p>XVI. <u>Assisting the applicant with a speech handicap to become employable</u> (5 minutes)</p> <p>A. <u>Community agencies</u></p> <p>* (The instructor should * mention the appropriate local agencies.)</p>	<p>XVI.</p> <p>A. Interviewers should be acquainted with agencies in the community where persons with speech defects can go to improve their condition.</p>

Points to be Made

Suggested Supporting Material

SUMMARY (5 minutes)

I. Review of the use of physical facts in interviewing and Placement

A. Analysis of physical facts about precise work capacities

B. Establishment of key points of necessary information

C. Matching facts of work capacity with the precise physical demands of jobs

- * Transition: The same procedure will be followed
- * throughout these sessions, in that for each disability, the group will review rapidly the physical facts and then proceed to work through their application to actual interviewing and referral.

I. In examining three separate groups of handicapped workers, the deaf, the hard of hearing, and those with speech defects, we have seen how the placement worker can use a refinement of the job analysis approach to do a professional matching job and provide for the utilization of the considerable skills of persons considered handicapped.

A. We have reviewed the kind of facts that are needed and how they can be analyzed.

B. We have developed interviewing aids for those three handicaps that will serve as constant reminders of the key points to be obtained.

C. We have developed together the methods for translating technical terminology on handicaps into its exact occupational meaning.

Points to be Made

Suggested Supporting Material

PRESENTATION (Cont'd)

I. Physical Facts about Orthopedic Handicaps in General
(5 minutes)

A. Extent of such disability

B. Types: May affect any part of the skeleton

- * (Ask what an orthopedic
- * disability is).

C. Readily visible

D. Chief causes

1. Accident

2. Congenital Malformations

3. Disease

I.

A. Nation-wide experience has shown that orthopedic disabilities are those that occur most frequently among workers. The importance of knowing the extent to which orthopedics can work effectively is hard to over-emphasize, because they represent so large a group of the potential working force.

B. They include all types of defect, impairment, or peculiarity of the skeletal structure, (muscle, bone and joint) of the body which affect ability to feel or move or both. Some examples would be the restricted use of an arm or leg due to infantile paralysis or other disease, spinal curvatures, amputations or absence of all or parts of a limb.

Parts of the body usually affected in orthopedic handicaps are arms and hands, legs and feet, back and shoulders.

C. Orthopedic handicaps, being visible, are the most easily recognized. Some may be evidenced only in movement, while others are structural.

D. The causes are the following:

1. Two-thirds of all orthopedic handicaps are due to accident or injury sustained in industry, at home, or in public places.

2. A small percentage of orthopedic disabilities were present at birth.

3. One-third of all orthopedic handicaps are caused by disease. Medical reports are desirable for some but not all defects due to disease. The interviewer should familiarize himself with the circumstances under which they are desired.

Points to be Made

Suggested Supporting Material

II. Physical Facts About
handicaps of the Arms
and hands
(10 minutes)

(This material, being taken
* from the handbook, should
* be reviewed rapidly by the
instructor).

A. Arms and Hands

1. Amputations or
absence of some or
all parts

a. Arm

b. Hands and fingers

(1) Loss of fingers
not always a
handicap

(2) Examples of
what to note

II.

A. We will consider first arm and hand disabilities

1. Many of these involve amputations or ab-
sence of members.

a. In general, the more that remains of the
hand or arm the more use there is of the
member. The shorter the arm stump the
more difficult it becomes for an indi-
vidual to balance the body. Persons
with high amputations may develop com-
pensating posture curvatures to retain
balance. An amputation below the elbow
usually leaves the person with greater
capacity than does an amputation above
the elbow.

b. Not all amputations of fingers render
an applicant physically handicapped.

(1) Manual workers with only partial
amputation of one or two fingers
(but not of the thumb) are not
handicapped if they have a trade
and expect to continue in it.
(Example: woodworking machine
operator)

(2) Interviewers should note carefully
which hand is affected, which fingers
are missing and to what extent (1st,
2nd joint). Loss of a thumb is a
considerable handicap. The thumb
counteracts and supports the fingers
in such actions as fingering (pinch-
ing, grasping, holding), pushing,
pulling, carrying, throwing and
lifting.

Points to be Made	Suggested Supporting Material
<p>(3) Even loss of thumb not always seriously restrictive</p> <p>(4) Artificial appliances for appearance and use</p> <p>(a) May equip worker for a job</p> <p>(b) <u>May not be helpful</u></p> <p>c. Other disabilities of arms and hands</p>	<p>(3) These activities may be limited but not necessarily eliminated because the thumbless hand can still grasp some objects between fingers and palm so as to push, pull, carry, throw, etc., or the other hand may be trained to perform these functions.</p> <p>(4) Artificial arms or hands are worn for the sake of appearance rather than use, since none have yet been contrived which both look and function like the human hand. Appliances which can increase the functional capacity of an individual are hook shaped.</p> <p>(a) Equipped with this appliance, applicants can perform jobs such as welding where the work is held firmly by the hook and the normal hand manipulates the torch.</p> <p>(b) Those lacking a hand below the wrist rarely use appliances since the wrist movement remaining gives some dexterity and an appliance would only be a hindrance.</p> <p>c. Other disabilities of the shoulders, arms and hands are a tremor (shaking), rigidity, (stiffness), flaccidity (flabbiness), dwarfing (small), enlargement of the joints, twisting, wasting of some parts, or additional appendage.</p>
<p><u>I. What is Involved in Interviewing Workers with Arm and Hand Disabilities</u> (20 minutes)</p> <p><u>A. Getting the information</u></p> <p>1. From the applicant</p>	<p>III.</p> <p>A.</p> <p>1. For arm and hand disabilities, the points are the following:</p>

a. Signature

a. Some orthopedic conditions not clearly visible will be evident when the applicant tries to write his signature on an application card

b. Manner of walking

b. Watch the applicant as he approaches the desk, since some conditions can be concealed by the way an applicant carries his coat, newspaper or pocketbook, or the way he leaves his hand in his pocket.

c. Direct questions and demonstrations

c. In questioning applicants with orthopedic defects the interviewer must exercise to the full his professional skill. He must be able to discuss the work limitations of the disability as freely as a physician might and with as little embarrassment.

d. Importance of a professional attitude

d. After establishing a friendly and unembarrassed rapport, the interviewer should feel free to ask the applicant to discuss his capacity, and even to demonstrate movement possible to him.

e. Demonstration of capacities

e. Some of these will be whether he can:

- (1) Move his arms over head - out to side - front, back and down
- (2) Bend arm at elbow
- (3) Rotate and bend wrist
- (4) Flex all or some fingers
- (5) Touch thumb to each finger on a hand
- (6) Close fist

2. Medical reports for certain conditions

2. Medical reports are desirable only if the condition is due to tuberculosis of the bone arthritis, or if the amputation has recently occurred and person is still under medical care. A medical report is desirable in cases of osteomyelitis if the condition is recurrent and in cases of muscular dystrophy if the applicant cannot adequately describe his capacity.

B. What to record

B. The key points to remember and record for arm and hand disabilities are the following:

Points to be Made	Suggested Supporting Material
<p>(During this discussion elicit from the group the key points to be recorded about persons with arm and hand limitations and develop an INTERVIEWER'S AID for arm and hand defects.)</p> <p>1. Amputations of arms</p> <p>2. Amputations of hands or fingers</p> <p>3. Other arm and hand disabilities</p> <p>C. <u>Example of what to record</u></p> <p>* (Refer the group to the application card in Exercise No. 8)</p>	<p>1. Amputations of arms.</p> <ol style="list-style-type: none"> When lost arm and why Where amputation comes Any problem of balance How much can he use stump (to hold package under arm, or hold down work or back up work) Any artificial limb, how well used Condition of stump General physical condition Whether ambi-dextrous. <p>2. Amputations of hands or fingers</p> <ol style="list-style-type: none"> Exact parts amputated When, why Remaining capacity - how much fingering, handling, etc. <p>3. Other disabilities.</p> <p>(Tremor, rigidity, flaccidity, dwarfing, twisting, wasting, etc.)</p> <ol style="list-style-type: none"> Describe Cause Time of onset, prognosis Capacity left for handling (lift arm overhead, out to side) fingering Conditions to be avoided (dampness, if disability is due to arthritis, etc.) <p>C. The application card for <u>William Gray</u>, presented as part of <u>Exercise No. 8</u>, is an example of what might be recorded for an arm amputation (It will be used later to apply all the considerations for arm disabilities.)</p>

Points to be Made	Suggested Supporting Material
<p>V. <u>Matching the Work Capacity of Workers with Arm Limitations with the Physical Demands of Jobs</u> (10 minutes)</p> <p>A. <u>Importance of individual consideration</u></p> <p>B. Significant working conditions</p> <p>* (Ask what working conditions are important to check.)</p> <p>C. Exercise No. 8: <u>"Classifying a worker with an arm handicap and choosing suitable work"</u></p>	<p>IV.</p> <p>A. Again, individuals, even those with identical amputations, will vary considerably in ultimate capacity because of the other factors (attitude, adaptability, former skills, etc.) that enter the picture.</p> <p>B. Wet, slippery floors may be a particular hazard for those with precarious balance, and we have seen that persons with disabilities arising from arthritis should avoid wet, cold surroundings, or those subject to sudden temperature changes.</p> <p>Other conditions that might require evaluating are: hot, humid (both of which may affect comfort in wearing artificial appliances), vibration, mechanical hazards, moving objects, cramped quarters, high places.</p> <p>C. <u>Exercise No. 8 has as its objective practice in determining suitable occupational codes and noting any work limitations or special considerations involved in proper placement and guidance.</u></p>
<p>V. <u>Assisting the Worker with an Orthopedic Handicap to become Employable</u> (5 minutes)</p> <p>* (Local agencies must be included in this discussion)</p> <p>A. Private agencies</p>	<p>V. Many different kinds of aid and training are offered to persons with orthopedic handicaps. Private and public agencies supply prosthetic appliances and work training. Among these are:</p> <p>A. <u>Private agencies</u> Rotary Clubs Kiwanis Clubs Societies or Associations for Crippled Children National Foundation for Infantile Paralysis Other Local philanthropic organizations (<u>List</u>)</p>

Points to be Made	Suggested Supporting Material
<p>B. Public agencies</p>	<p>B. Public agencies <u>Vocational Rehabilitation agency</u> Hospitals and Institutions Schools and other <u>local</u> agencies (<u>List</u>)</p>
<p><u>VI. Physical Facts About Orthopedic Disabilities of the Legs and Feet</u> (10 minutes)</p> <p>(Review rapidly)</p> <p>A. <u>Two groups: Absence of parts and other impairments</u></p> <p>B. <u>Amputations:</u></p> <ol style="list-style-type: none"> 1. Not all represent handicaps 2. Higher amputations present more serious handicap 3. Artificial appliances for use, not appearance <ol style="list-style-type: none"> a. Work opportunity improved by artificial legs 	<p>VI. A Second category of orthopedic disabilities are those of the legs and feet. Many of the considerations for such disabilities are the same as those for arms.</p> <p>A. As is the case with arm handicaps, leg disabilities may be grouped in two categories: (1) absence of all or part of the limbs due to amputation, or (2) impairment or other peculiarity caused by disease or present at birth.</p> <p>B.</p> <ol style="list-style-type: none"> 1. Not all amputations or absence of parts result in a handicap. The loss of one or two toes (with the exception of the big toe) when there is no resulting effect on balance, does not constitute a problem in placement. 2. Other factors being equal, the higher the amputation the more difficult is the power of locomotion even with a well fitted appliance. 3. Artificial legs are for use rather than appearance. They can be built with toe, ankle and knee action so the person skillful in the use of his appliance loses as little action as possible. <ol style="list-style-type: none"> a. Workers with artificial legs have greater opportunity than those using one or two crutches. Some people with limbs attached below the knee may even be without a perceptible limp. Others who do not adjust as well may have a marked limp or even use a cane in addition.

C. Other disabilities of hips and legs

1. Kinds of disabilities

C.

1. Other disabilities of the hips and legs are rigidity (stiffness), flaccidity (flabbiness or weakness), tremor (trembling), warping, enlargement of joints, twisting and wasting of some parts. The section on neurological disorders should be consulted for additional information. Flat feet or fallen arches should be considered a handicap only when the person has to stand or walk for long periods of time.

II. What is Involved in Interviewing Workers with Leg Disabilities
(10 minutes)

A. Getting the information

1. From the applicant

What do you observe?

a. Degree of limping

b. Prosthetic appliances

2. From medical reports

a. Translating medical reports into job language

(Refer the class to
* a typical medical

VII.

A.

1. Items to observe about leg disabilities are readily evident. For the most part, leg disabilities are easily recognized either as the applicant approaches the interviewer's desk or in the way he stands or sits.
 - a. The interviewer should note carefully the degree of limping, if any, (slight, moderate, marked) or any other peculiarity of gait (scissor walk, walking on toes, etc.)
 - b. Prosthetic appliances, braces, shoes, cane, crutch, etc., should also be noted.
2. Medical reports are desirable under the same circumstances as for arm and hand disabilities; desirable only if the condition is a recent amputation, requiring medical care, or tuberculosis, or arthritis or osteomyelitis.
 - a. From the medical report such as that for Henry Mount, who has a leg disability, (see Exercise No. 9), the interviewer must translate the occupational meaning of the medical facts.

* report for orthopedic condition involving the leg as presented in Exercise No. 9 for Henry Mount)

B. What to record

C. Examples of What to record

(Refer the group to typical application cards for each of the two kinds of leg and foot disabilities, as presented in Exercise No. 9 for Salvatore Donato and Henry Mount.)

For example, the medical fact that the activities of kneeling and crawling are forbidden for Henry Mount means occupationally that he can no longer work at his old trade of linoleum layer, but must be guided into and trained in new work.

B. The key points to be recorded are very similar to those for arm and hand handicaps.

C. The application cards for Salvatore Donato and Henry Mount, presented as part of Exercise No. 9, are examples of what to record for leg disabilities.

VIII. Matching the work capacity of workers with leg limitations with the physical demands of jobs (20 minutes)

*(Ask what physical demands items are important in placement of applicant with leg limitations.)

A. Activities the significant factors

B. Significant working conditions

* (Ask what working conditions should be checked.)

C. Exercise No. 9, "Classifying a worker with a leg disability and choosing suitable work

VIII.

A. Allowing for individual differences, the interviewer will evaluate the following items for leg limitations: walking, jumping, running, balancing, climbing, crawling, standing, turning, stooping, crouching, kneeling, sitting (which may be difficult for some persons with stiff knees, especially if they have to sit in cramped quarters) reaching, throwing, lifting, (these last three included if person must lift, throw or reach while standing). Carrying, pushing, pulling.

B. Hot, humid, (both affect comfort in wearing artificial limbs, braces), wet (slippery), vibration, mechanical hazards, moving objects, cramped quarters and high places, are the important working conditions.

C. Exercise No. 9, has as its objective the application of principles for classification, and of considerations for placement of workers with leg disabilities.

Points to be Made	Suggested Supporting Material
<p>X. <u>Physical facts about handicaps of the back and the spinal column</u> (10 minutes)</p> <p>* (This material, being taken from the Handbook, should be reviewed rapidly by the instructor).</p> <p>A. <u>Spinal Curvatures</u></p> <p>1. Some an appearance handicap only</p> <p>2. Visible evidences</p> <p>B. <u>Back sprains or disabilities</u></p> <p>1. Wry neck, limiting turning</p>	<p>IX.</p> <p>A. The spinal column is the fundamental part of axial skeleton. It supports the visceral organs and transmits the weight of all of these parts of the body to the pelvis and lower limbs.</p> <p>1. Some curvatures, acquired in early childhood, may be a handicap in appearance only, if no functional ability has been lost and no support (corset, brace) is needed.</p> <p>2. Evidence of curvature visible to an interviewer is any of the following:</p> <p>a. Protrusion of spinal column (technically called kyphosis and colloquially called, hump-back).</p> <p>b. Uneven shoulders, one being wider and higher than the other.</p> <p>c. Uneven waistline or hips, one side being larger than the other.</p> <p>d. Head apparently resting on shoulders, with neck not showing. (b, c, d, are lateral curvatures or scoliosis)</p> <p>B. Other types of back disabilities are:</p> <p>1. Wry neck (torticollis) is a contracted state of the muscles of the neck, usually fixing the head in an unnatural position and limiting ability to turn head. It may arise from rheumatism or spasm of muscles. Evaluation of work capacity for an applicant with wry neck should include an estimate of how well or fast he can turn (he may learn to turn body if he cannot turn head).</p>

Points to be Made	Suggested Supporting Material
<p>2. Arthritic stiffening necessitating avoidance of unfavorable conditions</p> <p>3. Lumbar Sprains, limiting twisting movement, lifting and involving carrying, pushing, pulling, throwing</p>	<p>2. Stiffening of the spine due to arthritic changes will necessitate elimination of jobs with conditions which would aggravate the arthritis, (dampness, sudden temperature changes, humidity).</p> <p>3. Lumbar region sprains affect the waistline area, which is sensitive to every muscular action of the body. These sprains especially if unrelieved by belts, may lower capacity for weight-moving activities considerably. Sudden twisting or wrenching of a joint whereby ligaments tear or are separated from their "mooring" is known as a sprain.</p>
<p><u>What is involved in interviewing workers with back and spinal column limitations (10 minutes)</u></p> <p>A. <u>Getting the information</u></p> <p>1. <u>From the applicant</u></p> <p>2. <u>From medical reports for certain conditions</u></p> <p>a. Translating medical reports to job language</p> <p>* Refer the group to * the typical medical report for a <u>spinal condition</u>, presented for <u>Helen Walters</u> as part of <u>Exercise No. 10.</u></p> <p>B. <u>What to record</u></p>	<p>X.</p> <p>A.</p> <p>1. During the interview the applicant can be asked to describe the extent to which his activities are limited. Many of these limitations will be clearly evident.</p> <p>2. Medical reports are desirable in conditions of Tuberculosis, or arthritis, or any disease actually undergoing treatment.</p> <p>a. The typical medical report for the <u>spinal disability of Helen Walters</u> presented as part of <u>Exercise No. 10</u> must be translated to its occupational meaning.</p> <p>Specifically this means that the limitations on physical activities (1-10, 12, and 14-18,) and working conditions, would lead into jobs that alternate sitting and standing.</p> <p>This is an example of an ideal medical report, with full "Remarks" from the doctor to guide the interviewer.</p> <p>B. The <u>key points to remember and record for spinal disabilities</u> are the following:</p>

Points to be Made	Suggested Supporting Material
<p>*(During this discussion *elicit from the group key points to be recorded and develop and INTERVIEWING AID for spinal disabili- ties.)</p> <p>1. <u>Examples of what to record</u></p> <p>(Refer the group to the typical application card for the <u>spinal limitation</u>, that for <u>Helen Walters</u>, presented as part of <u>Exercise No. 10.</u>)</p>	<p>(1) Description (left shoulder high, wider than right, etc.) (2) Cause, date of onset, prognosis (3) Appliances used (4) Capacity for bending, kneeling, carrying, etc. (5) Other disabilities (6) Conditions to be avoided</p> <p>1. The application card for Helen Walters, presented as part of <u>Exercise No. 10</u> serves as an example of what to record.</p>
<p>I. <u>Matching work capacity of applicants with spinal limitations with the physical demands of jobs (10 minutes)</u></p> <p>What physical demands items are important to consider?</p> <p>A. <u>Activities, the key factor</u></p> <p>1. Other functions may be involved</p> <p>B. <u>Significant working conditions</u></p>	<p>XI.</p> <p>A. Certain specific activities are often restricted to workers with spinal limitations. This may be <u>standing, sitting, lifting, carrying, pushing,</u> <u>pulling, throwing, walking, jumping, running,</u> <u>balancing, turning, crouching, kneeling.</u></p> <p>1. A curvature cramps the organs, including heart and lungs, and may be accompanied by internal disorders.</p> <p>B. Workers with spinal limitations may have to avoid <u>cramped quarters, vibration, sudden</u> <u>temperature changes, dampness or humidity.</u></p>

Points to be Made	Suggested Supporting Material
<p>*(Ask what working conditions *are important to check.)</p> <p>C. Exercise No. 10 <u>"Classifying a worker with a spinal handicap, and choosing suitable work"</u></p>	<p>C. Exercise No. 10 has as its objective the <u>application of the principles for classifying and placing workers with spinal limitations.</u></p>
<p>SUMMARY (5 minutes)</p> <p>. <u>Repetition of the elements in placement for any dis- ability</u></p>	<p>I. Our consideration of hearing, speech and ortho- pedic handicaps have followed the same pattern:</p> <p>A. The physical facts. B. What is involved in interviewing for the part- icular handicap including getting the inform- ation from the applicant or from medical re- ports and recording: C. Considerations for matching the work capacity with the physical demands of jobs.</p>
<p>. <u>Preparation for third day</u></p> <p>A. Reading</p> <p>B. Development of the Glossary</p>	<p>II.</p> <p>A. Ask the group to prepare for the discussion for the next day by reading <u>Part II</u>, Sections on respiratory, cardiovascular, and miscel- laneous disabilities, in the handbook.</p> <p>B. Remind the group to continue the development of their glossary of new terms they encounter in the readings or the discussions, using the medical dictionary.</p>

- 119 -
Instructor's
Discussion Outline

VOCATIONAL ASPECTS OF COMMON DISABILITIES
(3) RESPIRATORY, (4) CARDIOVASCULAR,
(5) MISCELLANEOUS DISABILITIES

Objective: To survey the important facts about three more groups of disabilities (from the Handbook), showing how these facts can be used in interviewing and referring.

**Outline
Of Main
Ideas:**

1. Review of the facts needed to high-light the vocational aspects of any disability (5 minutes)
2. Respiratory Disabilities (90 minutes)
 - a. Physical facts about respiratory disabilities
 - b. Application of these facts about respiratory disabilities to actual problems in interviewing and classifying
 - c. Matching work capacity with physical demands
3. Cardiovascular disabilities (120 minutes)
 - a. Physical facts about cardiovascular disabilities
 - b. Application of these facts about cardiovascular disabilities to actual problems in interviewing and classifying
 - c. Matching work capacity with physical demands
4. Miscellaneous Disabilities
 - a. Physical facts about these miscellaneous disabilities
 - b. Application of these facts about these miscellaneous disabilities to actual problems in interviewing and classifying
 - c. Matching work capacity with physical demands

Units 3a and 3b
Third Morning and Afternoon

REMINDERS FOR THE INSTRUCTOR

Special Advance Preparation:

Exercise No. 12 on Page 10 is an interview with an applicant with a cardiac handicap, with the instructor acting the part of the worker. The instructor will want to become familiar with the necessary facts.

Materials Needed:

1. Supply of blank "Physical Capacities Appraisal" forms for each trainee to use in Exercise No. 12
2. Supply of blank application cards for each trainee to use in Exercise No. 15

Points to be Made	Suggested Supporting Material
<p style="text-align: center;"><u>TRANSITION AND MOTIVATION</u></p> <p>I. <u>Review of the items needed to highlight the vocational aspects of any disability</u></p> <p>* (Ask the group to recall the items needed to do a placement job for a handicapped worker and <u>list them on the board as the group mentions them.</u>)</p>	
	<p>I. The group will recall that according to the previous discussions, the elements in our process are the following:</p> <p>A. The physical facts, including:</p> <ol style="list-style-type: none"> 1. Information obtainable from the applicant in the interview, and the key points to look for. 2. Medical reports from physicians. <p>B. What to record about the disability.</p> <p>C. How to classify the actual work capacity.</p> <p>D. How to match work capacity and the physical demands of jobs.</p> <p>E. Sources of help, such as, training or other assistance for the unemployable.</p>

PRESENTATION

<p>I. <u>Physical facts about respiratory disabilities</u></p> <p>A. <u>Having to do with the lungs</u></p> <p>B. <u>Hard to recognize because not visible</u></p>	
	<p>I.</p> <p>A. Respiratory disabilities are those which have to do with the lungs and with breathing. Among them are <u>tuberculosis</u>, <u>silicosis</u>, <u>asthma</u>, <u>chronic bronchitis</u>, <u>pulmonary emphysema</u>, <u>pulmonary empyema</u>, and <u>bronchiectasis</u>.</p> <p>B. Because these disabilities are not visible, the interviewer must exercise considerable skill and ingenuity in order to uncover them. Many applicants with chronic or arrested diseases of the lungs are loathe to admit it for fear they will not be employed.</p>

Points to be Made	Suggested Supporting Material
<p>I. <u>What is involved in interviewing applicants with respiratory disabilities</u> (20 minutes)</p> <p>A. <u>Getting the information</u></p> <ol style="list-style-type: none"> 1. From the applicant <ul style="list-style-type: none"> * (Ask the group to * recall the techniques for invisible handicaps) 2. From medical reports - always for pulmonary tuberculosis <ol style="list-style-type: none"> a. May be from clinic b. Recent examination desirable c. Contents (if not in PD form) <ul style="list-style-type: none"> * (List on the * board) <p>(1) List of stages</p> <ul style="list-style-type: none"> * (List on the * board) 	<p>II.</p> <p>A. Respiratory disabilities, being invisible, require all the techniques suggested for invisible handicaps.</p> <ol style="list-style-type: none"> 1. Particularly diplomatic questioning is required in order to draw from the applicant the facts about illness of this kind. All the points of technique mentioned earlier may be helpful. 2. The interviewer should secure a medical report in order to safeguard the public. Not only is a report desirable for applicants known to have pulmonary tuberculosis, but also for those who state that they have had a rib operation (thoracoplasty) without admitting tuberculosis. <ol style="list-style-type: none"> a. Reports may be secured from a clinic or doctor to which the applicant reports regularly. b. Reports should be based on an examination within the last three months. Ideally, the reports should be in terms of physical capacity and suitable working conditions, using the physical demands analysis form. c. If a report in physical demands terms is not obtainable, the report should at least state: <ul style="list-style-type: none"> <u>The state and stage of the disease</u> <u>How long it has been inactive</u> <u>Condition of the sputum</u> <u>Number of hours of work possible per day</u> <p>(1) Some doctors will refer to the <u>stage</u> of the disease as <u>minimal</u> (I), <u>moderately advanced</u> (II), or <u>advanced</u> (III) indicating the extent of involvement of the lung.</p>

Points to be Made	Suggested Supporting Material
<p>d. Only certain cases employable</p> <p>e. Follow-up necessary</p> <p>(1) Usually after one month</p> <p>B. <u>What to record</u></p> <p>* (During this discussion elicit from the class the key points to be recorded and develop an INTERVIEWER'S AID for respiratory disabilities)</p> <p>1. <u>Example of what to record</u></p> <p>* (Refer the group to the application card for a worker with <u>respiratory handicap</u>, presented in Exercise No. 11 for Martin Borden)</p>	<p>d. Only these applicants are considered employable who are in the quiescent, apparently arrested, arrested or apparently cured status, with negative sputum.</p> <p>e. Pulmonary tuberculosis cases are among those that often require follow-up after placement to assure that the work is not likely to lead to a recurrence.</p> <p>(1) The follow-up interview, usually scheduled for a month after placement, should verify details of physical activities and conditions.</p> <p>B. The <u>key points</u> to remember and record for respiratory disabilities are the following:</p> <p>State (arrested or quiescent) and inactive since _____ date Sputum (negative or positive) Number of hours of work possible per day Prognosis Capacity remaining Conditions to be avoided</p> <p>1. The application card for <u>Martin Borden</u> in Exercise No. 11 typifies good entries for a respiratory disorder.</p>
<p>III. <u>Matching the work capacity of applicants with respiratory limitations with the physical demands of the job.</u> (10 minutes)</p> <p>* (Ask what physical demands items are important to consider)</p>	<p>III.</p>

Points to be Made	Suggested Supporting Material
<p>A. <u>New concepts of capacity</u></p> <ol style="list-style-type: none"> 1. Wide variations in possible conditions 2. Free silica the only dangerous dust 3. Old restrictions now modified 	<p>A. Recent studies based on wide samplings have begun to change the thinking about physical capacities and working conditions of ex-tuberculous individuals.</p> <ol style="list-style-type: none"> 1. Allowing for individual differences and the length of time the condition has been inactive, some such people have successfully performed in jobs ranging from light to very heavy, and under conditions ranging from dry air and stable temperature to high humidity and great heat. (Those doing heavy work or working under not-so-desirable conditions tend to be persons who have had tuberculosis many years ago and had only light cases.) 2. There is no scientific evidence to show that presence of dusts, other than silica dust in a free state, predisposes one to pulmonary tuberculosis, although other respiratory ailments may develop, depending on the irritant. 3. Thus, some of the former restrictions imposed on old tuberculosis cases may be unnecessary where the individual has good personal hygiene and reports for periodic chest X-rays.
<p>B. <u>Former occupation first choice</u></p>	<p>B. It is generally preferable to place the applicant in his previous occupation if his capacity and the working conditions permit. If a change of occupation is required, work should be sought which utilizes as many of the elements and conditions of past experience as he can still handle, to minimize anxiety and fatigue in learning a new job in new surroundings.</p>
<p>C. <u>Close personal contact may be forbidden</u></p>	<p>C. Because an ex-tuberculous person may have a reactivation of the disease for some time before he or anyone else becomes aware of it, doctors sometimes disapprove of jobs involving close personal contact with others, such as barbering, teaching, or attending children.</p> <p>However, <u>cases that have been arrested for a long time, cases with consistent history of negative sputum, or more recent cases subject to close and frequent medical check-up are now considered employable in these jobs.</u></p>

Points to be Made	Suggested Supporting Material
<p>D. <u>Physical Activities</u></p> <p>*(Ask what physical activities items are important to consider)</p> <p>E. <u>Significant working conditions</u></p> <p>What working conditions are important to check?</p> <p>F. <u>Sheltered work for applicants not employable full time</u></p> <p>*(The Instructor should mention the name and address of any sheltered workshops in the area and suggest that interviewers visit them.)</p> <p>G. <u>Respiratory diseases other than tuberculosis</u></p>	<p>D. Activities to be checked are: <u>walking, jumping, running, climbing, crawling, standing, turning, stooping, crouching, reaching, carrying, lifting, pushing, pulling, bending.</u> (These may be more limited in thoracoplasty cases.)</p> <p>E. Working conditions that may be harmful are the presence of silica dust in a free state, temperature changes, wetness, humidity and heat. Other dusts should probably be avoided because they lead to <u>other</u> chest conditions such as bronchial congestion.</p> <p>F. Sheltered workshops exist in some communities for the ex-tuberculous. Workers may be employed for less than a standard day or they may be employed on jobs where production standards are low, permitting them to earn until such time as they regain their health sufficiently to maintain production standards or work full time.</p> <p>(Some of the local shops should be mentioned here)</p> <p>G. Silicosis is defined as Pneumoconiosis, resulting from the inhalation of the dust of stone, sand, or flint containing silicon dioxide or certain silicates; grinders' disease. It results in the formation of fibrous tissue in the lungs.</p>
<p>1. <u>Silicosis</u></p> <p>*(Ask group to find Silicosis in the Medical Dictionary)</p> <p>a. Significant working conditions</p> <p>b. Medical report desirable</p>	<p>1. Silicosis is discovered most frequently among workers engaged in mining, quarrying, ceramic manufacturing, tunnel construction, blasting and foundry work.</p> <p>a. Such applicants must work in surrounding free from silica dust.</p> <p>b. A medical report is desirable to verify the diagnosis of silicosis.</p> <p>(NOTE: If this disability is common in the local community, an example should be cited here.)</p>

Points to be Made

Suggested Supporting Material

2. Asthma

a. Significant working conditions

* (List on the
* board)

b. Medical report desirable

3. Chronic Bronchitis

a. Significant working conditions

b. Medical report desirable

4. Pulmonary Emphyema

5. Pulmonary Emphysema

2. Asthma is an interference with the free flow of air in and out of the lungs.

a. Workers with asthma must be placed in surroundings free of the specific irritant, which may be feathers, flour, certain chemicals, certain plant pollens.

While capacity and type of surroundings will vary among individuals, most asthmatics should probably avoid:

- (1) Sudden changes of temperature
- (2) Dust and fumes
- (3) Poorly ventilated places
- (4) Exposure to dampness and cold
- (5) Excessive fatigue.

b. A medical report is desirable with all cases of asthma in order to ascertain the type and the cause wherever possible so that the specific irritant can be avoided.

3. Chronic bronchitis is a long-continued inflammation of the bronchial tubes, while acute bronchitis is an inflammation of short duration.

a. Persons subject to acute attacks of bronchitis are not regarded as physically handicapped since attacks are usually of short duration. After recovery the applicant may return to his regular employment.

b. A medical report, however, should be secured in the same terms as for asthma, and the general limitations will also tend to be similar.

4. Pulmonary emphyema is an accumulation of pus in the lungs. The work capacity of applicants with Pulmonary Emphyema will very considerably depend upon the extent of the disease and the after effects.

5. Pulmonary Emphysema is a swelling due to the presence of air in the tissues. A medical report is desirable to show the extent of this disease. The more complicated cases may require sedentary work.

Points to be Made	Suggested Supporting Material
<p>6. <u>Bronchiectases</u></p> <p>H. <u>New Lung Therapy</u></p> <p>1. <u>Thoracoplasty</u></p> <p>2. <u>Pneumo-thorax</u></p> <p>I. <u>Exercise No. 11</u></p> <p><u>"Classifying Workers with Respiratory Disabilities and Choosing Suitable Work"</u></p>	<p>6. <u>Bronchiectases is a dilation of the bronchia.</u> Workers with this disease may sometimes be cautioned against working with and around others. Standards for such patients and their employability are similar to those of ex-tuberculous patients.</p> <p>H. Treatments with which the interviewer may well be acquainted are:</p> <p>1. <u>Thoracoplasty: plastic surgery or operative repair of defects of the chest.</u></p> <p>2. <u>Pneumo-thorax: the artificial injection of nitrogen gas, for the purpose of collapsing and immobilizing the lung for treatment.</u></p> <p>I. Exercise No. 11 has as its objective the application of the principles for classifying workers with respiratory disabilities.</p>
<p>IV. <u>Physical facts about applicants with cardiac disabilities. (5 minutes)</u></p> <p>A. <u>A frequent non-visible handicap</u></p> <p>B. <u>Disease of young and old</u></p>	<p>IV. Cardiac diseases are those affecting the heart.</p> <p>A. Among the non-visible handicaps of workers coming to the Employment Service, the diseases of the heart are among the most frequent.</p> <p>B. Heart Disease, contrary to belief, affects both young and old. If a cardiac person takes care of himself, and works within the limits of his endurance at a suitable job, the years of his working life should be long. In addition, most cases coming to the Employment Service are of the rheumatic type, the group for which generally the best prognosis can be given.</p>
<p>V. <u>What is involved in interviewing applicants with cardiac disabilities? (50 minutes)</u></p>	<p>V.</p>

Points to be Made	Suggested Supporting Material
<p>A. <u>Getting the Information</u></p> <p>1. <u>From the applicant</u></p> <ul style="list-style-type: none">* (Ask the group to* repeat some of the techniques for non-visible handicaps) <p>2. <u>From medical reports</u></p> <p>a. American Heart Association classification often used</p> <p>b. The meaning of American Heart Association classifications</p>	<p>A.</p> <p>1. Identification of cardiac difficulties will depend upon use of the same interviewing techniques discussed for respiratory diseases and hearing, such as <u>examining school record</u>, <u>draft classification</u>, and <u>the like</u>.</p> <p>2. Medical reports may be secured for applicants who indicate a heart condition. This report should show:</p> <p><u>Cause</u> <u>Specific impairments</u> (each of which give rise to different sets of limitations) and <u>Work capacity left</u>, preferably in physical demands terminology.</p> <p>a. In some areas, where clinics and doctors are familiar with the classification of organic heart disease devised by the American Heart Association, the report can be based on this classification. There are two:</p> <p>The <u>functional</u> grouping is based on certain physical factors, and upon the amount of activity a person can or thinks he can perform without developing shortness of breath (mouth breathing) and pain in the chest.</p> <p>The <u>therapeutic</u> grouping is virtually the doctor's prescription for the amount of physical activity which is permissible. It is based both on the amount of effort possible without discomfort and also upon the nature and severity of the organic defects and the prognosis. Obviously then, <u>therapeutic classifications</u> are more significant for good selective placement.</p> <p>b.</p>

Points to be Made	Suggested Supporting Material
<p>*(Have interviewers * turn to Workbook and review briefly together the mean- ing of <u>Functional</u> and <u>Therapeutic</u> classification)</p>	
<p>(1) Functional Classification</p> <p>I - no limitation</p> <p>II - slight limitation</p> <p>III - marked limitation</p> <p>IV - complete limitation</p>	<p>(1) The <u>Functional classifications</u> are:</p> <p>Class I. Patients with cardiac disease and <u>no limitation of physical activity</u>. Ordinary physical activity does not cause discomfort. Patients in this class do not have symptoms of cardiac insufficiency, nor do they experience anginal pain.</p> <p>Class II. Patients with cardiac disease and <u>slight limitation of physical activity</u>. They are comfortable at rest. If ordinary physical activity is undertaken, discomfort results in the form of undue fatigue, palpitation, labored breathing or anginal pain.</p> <p>Class III. Patients with cardiac disease and <u>marked limitation of physical activity</u>. They are comfortable at rest. Discomfort in the form of undue fatigue, palpitation, labored breathing or anginal pain is caused by less than ordinary activity.</p> <p>Class IV. Patients with cardiac disease who <u>are unable to carry on any physical activity</u> without discomfort. Symptoms of cardiac insufficiency, or of the anginal syndrome, are present, even at rest. If any physical activity is undertaken, discomfort is increased.</p>
<p>(2) Therapeutic Classification</p> <p>A - no restriction</p> <p>B - no severe effort</p>	<p>(2) The <u>Therapeutic Classifications</u> are:</p> <p>Class A. Patients with cardiac disease whose <u>physical</u> activity need not be restricted.</p> <p>Class B. Patients with cardiac disease whose ordinary physical activity need not be restricted, but who should be advised against unusually severe or competitive efforts.</p>

Points to be Made	Suggested Supporting Material
C - moderate restriction even in ordinary activity	<u>Class C.</u> Patients with cardiac disease whose ordinary physical activity should be moderately restricted.
D - marked restriction	<u>Class D.</u> Patients with cardiac disease whose ordinary physical activity should be markedly restricted.
E - complete rest	<u>Class E.</u> Patients with cardiac disease who should be at complete rest, confined to bed or chair.
(Review with the group the two sample medical reports on following pages)	<u>Possible:</u> Indicates presence of certain cardiac symptoms which while insufficient to warrant a diagnosis, still indicate caution in placement.
c. Translating Medical reports to job language	c. The "specific remarks" section interprets the real meaning of the functional and therapeutic classification in a fully made out medical report.
(1) Examples of medical reports in terms other than those of the physical demands analysis *(Read the reports * at right, and ask whether each applicant needs selective placement)	(1) Doctors frequently insist on limiting their reports to terms to which they are accustomed. Some typical medical reports might be the following: (a) <u>Diagnosis</u> - Possible heart disease <u>Prognosis</u> - Undetermined Specific Remarks - none (answer: <u>Not in need of selective placement if over 25 years of age</u>)
	(b) <u>Diagnosis</u> - Coronary Heart Disease III-D <u>Prognosis</u> - Guarded Specific Remarks: none made by doctor (Answer: <u>In most States, the applicant is not employable except possibly doing certified home work a few hours per day.</u>)

WAR MANPOWER COMMISSION

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BUREAU OF MANPOWER UTILIZATION

Division of Occupational Analysis and Manning Tables

PHYSICAL CAPACITIES APPRAISAL

CARDIAC

Name John Kane Age 35 Sex Height Weight

PHYSICAL ACTIVITIES	
<u>1</u> Walking	<u>X</u> 16 Throwing
<u>X</u> 2 Jumping	<u>X</u> 17 Pushing
<u>X</u> 3 Running	<u>X</u> 18 Pulling
<u>4</u> Balancing	<u>19</u> Handling
<u>X</u> 5 Climbing	<u>20</u> Fingering
<u>X</u> 6 Crawling	<u>21</u> Feeling
<u>7</u> Standing	<u>22</u> Talking
<u>8</u> Turning	<u>23</u> Hearing
<u>X</u> 9 Stooping	<u>24</u> Seeing
<u>10</u> Crouching	<u>25</u> Color Vision
<u>11</u> Kneeling	<u>26</u> Depth Perception
<u>12</u> Sitting	<u>27</u> Working Speed
<u>X</u> 13 Reaching	<u>28</u>
<u>X</u> 14 Lifting	<u>29</u>
<u>X</u> 15 Carrying	<u>30</u>

WORKING CONDITIONS	
<u>51</u> Inside	<u>66</u> Mechanical Hazards
<u>52</u> Outside	<u>67</u> Moving Objects
<u>53</u> Hot	<u>68</u> Cramped Quarters
<u>54</u> Cold	<u>X</u> 69 High Places
<u>X</u> 55 Sudden Temp. Changes	<u>70</u> Exposure to Burns
<u>X</u> 56 Humid	<u>71</u> Electrical Hazards
<u>57</u> Dry	<u>72</u> Explosives
<u>X</u> 58 Wet	<u>73</u> Radiant Energy
<u>59</u> Dusty	<u>74</u> Toxic Conditions
<u>60</u> Dirty	<u>75</u> Working With Others
<u>61</u> Odors	<u>76</u> Working Around Others
<u>62</u> Noisy	<u>77</u> Working Alone
<u>63</u> Adequate Lighting	<u>78</u>
<u>64</u> Adequate Ventilation	<u>79</u>
<u>65</u> Vibration	<u>80</u>

DETAILS OF PHYSICAL ACTIVITIES: Blank space = Full capacity; / = Partial capacity;
X = No capacity.

May lift, carry, handle, push or pull up to pounds per hour
May engage in activities numbered up to 2/3 of work period
May engage in activities numbered up to 1/3 of work period
Sight:
Hearing:
Others:

DETAILS OF WORKING CONDITIONS:

Diagnosis: Rheumatic Heart Disease - II B

Prognosis: Fair

Specific Remarks: Should stoop only intermittently to avoid straining chest muscles. Should do only occasional reaching, lifting, carrying, throwing, pushing, pulling. Lifting all right if not done too often. Can lift any weight which does not make him gasp for breath. Should avoid environmental items checked to avoid colds.

Date 194

Physician

Division of Occupational Analysis and Manning Tables

CARDIAC

Physician

Points to be Made	Suggested Supporting Material
<p>(2) Interviewer must interpret</p> <p>B. <u>What to Record</u></p> <ul style="list-style-type: none"> * (Elicit from the * group the key points to be recorded and develop an INTERVIEWER'S AID for cardiac disabilities) 	<p>(c) <u>Diagnosis</u> - Rheumatic Heart Disease IB Prognosis - Good - Mitral insufficiency</p> <p>(Answer: <u>Needs Selective placement</u>)</p> <p>(2) All such reports must be translated to physical demands terminology by the interviewer himself.</p> <p>B. The <u>key points</u> to remember and record for cardiac disabilities are the following:</p> <p><u>Cause</u> or type (heart disease due to hardening of the arteries or rheumatic fever or the like). <u>Classification</u> (if used by the doctor, since the interviewer never attempts to diagnose this classification himself). <u>Capacity</u> remaining <u>Working conditions</u> to be avoided <u>Prognosis</u></p>
	RECESS FOR LUNCH
<p>VI. <u>Matching the work capacity of applicants with cardiac diseases with the physical demands of the job</u> (20 minutes)</p> <p>What physical demands are important to consider?</p> <p>A. <u>Activities--the key factor</u></p>	<p>VI.</p> <p>A. Certain specific activities for worker with cardiac limitations should be carefully evaluated. Among these are:</p> <p><u>Crawling, running, climbing:</u> shortness of breath in these activities will indicate how much of each he can do.</p> <p><u>Lifting:</u> how much and how often can person lift without getting tired.</p> <p><u>Walking:</u> how far and long can he walk without fatigue?</p> <p><u>Reaching, pushing, pulling:</u> how often can he reach forward?</p>

Points to be Made	Suggested Supporting Material
<p>B. <u>Working conditions to be avoided</u></p>	<p>B. Working conditions to be avoided include:</p> <p><u>High places, mechanical hazards:</u> are undesirable on the whole for cardiacs with any limitation.</p> <p><u>Dust:</u> mitral cases, at least, should probably avoid dusty occupations because they induce coughs and catarrh, so favoring bronchial congestion to which these persons are particularly susceptible.</p> <p>The handbook gives details for <u>avoiding temperature changes and wetness for rheumatic heart disease</u> and for <u>avoiding stooping and bending for hypertensive heart disease</u>.</p>
<p>C. <u>Secondary factors often important</u></p>	<p>C. Also, since cardiacs must <u>avoid anxiety</u>, worry and irritation such as may arise in hazardous or unpleasant working conditions they should avoid occupations involving such factors as mechanical and electric hazards, toxic fumes, explosives and exposure to burns, etc.</p>
<p>1. Transportation to and on the job</p>	<p>1. Secondary factors that will have to be analyzed for cardiacs will be <u>time and transportation</u> to and from job, presence or absence of elevators in the building and the like.</p>
<p>D. <u>Use of the Classifications</u></p>	<p>D. With the classification as a guide and some knowledge of limitations gleaned from the foregoing descriptions, the interviewer will have to choose suitable work (until such time as doctors make out reports in specific terms of physical activities and suitable working conditions).</p>
<p>1. May determine whether or not placeable</p>	<p>1. For example, the applicant classified C may be able to work only a few hours a day, and then only near home so that traveling is minimized. Class III is not placeable except perhaps in sections where certified home work is permitted and the work can be brought to the individual or where applicant can work fairly near home. Individuals in III-C are doubtfully employable and will have to be especially carefully evaluated.</p>

7-3040 P138 bu

Points to be Made	Suggested Supporting Material
<p>2. Often figure in vocational guidance</p> <p>E. <u>Exercise No. 12</u></p> <p><u>Classifying the worker with a cardiac disability and choosing suitable work</u></p>	<p>2. Those under 25 with potential or possible heart disease will be accorded selective placement in order to guide them into occupations where there will be no undue strain on the heart.</p> <p>E. <u>Exercise No. 12 has as its objective the application of the principles for cardiac limitations.</u></p>
<p>VII. <u>Vascular Diseases</u> (15 minutes)</p> <p>A. <u>Varicose Veins</u></p> <p>B. <u>Thrombo-angiitis Obliterans</u></p> <p>C. <u>Phlebitis</u></p> <p>D. <u>Essential Hypertension</u></p>	<p>VII. <u>Vascular Diseases</u> are conditions affecting the arteries and the veins which interfere with the proper circulation of the blood.</p> <p>A. The <u>most common</u> vascular disease is <u>Varicose Veins</u>.</p> <p>Since the degree of severity varies, applicants with varicose veins will be considered handicapped only when the condition constitutes a problem in placement as defined elsewhere. Obviously, the standing, walking, climbing, crawling capacity of such individuals may be lowered.</p> <p>B. <u>Thrombo-angiitis Obliterans</u> is usually known as Buerger's Disease. Work capacity level of persons with amputations due to Buerger's disease treated under orthopedic handicaps. Continuous walking and standing and other activities that may be performed while walking or standing (pushing, carrying, etc.) may be greatly limited even before amputation, because of intermittent pain.</p> <p>C. <u>Phlebitis</u> is a disease whose limitations are similar to those of Varicose Veins.</p> <p>D. <u>Essential Hypertension</u> is a variable condition and occurs with a high degree of frequency, chiefly among people over 40 years of age. Arterial hypertension can exist with or without heart disease. It is desirable to secure medical reports for all applicants reporting high blood pressure to check on the possibility of cardiac involvement.</p>

Points to be Made	Suggested Supporting Material
<p>VIII. <u>Miscellaneous Disabilities</u> (70 minutes)</p>	<p>VIII. Grouped together as "Miscellaneous" are 10 disabilities sufficiently common to warrant some discussion, but not occurring frequently enough to be treated in the detail devoted to other handicaps.</p>
<p>A. <u>Hernia</u></p>	<p>A. Hernia is the first of these disabilities.</p>
<p>1. Physical facts</p>	<p>1. Hernia is the term given to any protrusion of a loop or knuckle of an organism or tissue through an abnormal opening. The handicap is common among men, found less frequently in women.</p>
<p>2. Medical reports only if under treatment</p>	<p>2. Medical reports are desirable in hernia cases only if the applicant is under treatment, has had recent treatment, or if the applicant reports a condition that would seem susceptible of improvement by medical attention.</p>
<p>a. Translating medical reports into job language. (Refer *the group to the *medical report for <u>Thomas Andersen</u> which is presented as part of <u>Exercise No. 13</u>)</p>	
<p>3. Matching physical capacity and suitable working conditions</p>	<p>3.</p>
<p>a. Selective placement not always necessary</p>	<p>a. Selective placement is rendered only those engaged in fairly strenuous non-sedentary work, or those whose occupations seem suitable to their condition but who are being rejected by employers by means of restrictive pre-employment examinations. Some who do sedentary work (such as truck drivers) involving great use of legs (as in jamming foot down on pedal) may also require selective placement. Clerical workers, however, would not.</p>

Points to be Made	Suggested Supporting Material
<p>b. Some require operation before placement</p> <p>c. Limitations hard to establish</p> <p>d. Activities the key factor</p> <p>e. <u>Exercise No. 13</u></p> <p><u>"Classifying a worker with a hernia and recommending suitable work"</u></p>	<p>b. Applicants with irreducible hernia, (one which cannot be placed back in its natural cavity) are not placeable until they have either secured a support or undergone operation.</p> <p>c. Limitations imposed on an applicant with hernia are hard to determine. He must be guided in most instances by the amount of pain induced by the work he does. Some find relief in the wearing of a belt or truss. The condition is frequently successfully overcome by an operation before the age of 40.</p> <p>d. If a medical report is secured, it is desirable to know the work capacity in terms of prolonged <u>standing, walking, running, lifting, carrying, throwing, pushing, pulling, reaching, climbing, stooping, crawling</u> and the like.</p> <p>e. <u>Exercise No. 13 has as its objective the application of the principles just discussed.</u></p>
<p>B. <u>Stomach Ulcers</u></p> <p>1. Work capacity</p> <p>a. Activities</p>	<p>B. Stomach ulcers are open sores of the lining of the stomach.</p> <p>1. They may require medical reports if the applicant is currently under treatment.</p> <p>a. <u>Stooping, kneeling, crawling, climbing,</u> may be unlimited for mild cases, partially or totally limited for severe cases.</p> <p><u>Pushing, pulling, lifting, carrying, throwing, jumping,</u> may be carried on to slight or moderate degrees depending on the individual. Heavy <u>pushing, lifting,</u> etc. may tend to be the exception rather than the rule, particularly if the applicant is on a very bland, mild diet.</p>

Points to be Made	Suggested Supporting Material
<p>2. Working conditions</p> <p>a. Odor</p> <p>b. Regular meals and rest</p> <p>c. Vibration</p>	<p>2.</p> <p>a. Certain odors may be distasteful to some individuals and cause further gastric upset.</p> <p>b. The frequency and regularity with which the applicant has to eat may require the interviewer to check such secondary job factors as:</p> <p style="padding-left: 40px;">Shifts (day jobs usually better)</p> <p style="padding-left: 40px;">Meal hours</p> <p style="padding-left: 40px;">Rest periods (time to get food if needed)</p> <p style="padding-left: 40px;">Eating facilities</p> <p>c. Vibration may be harmful.</p>
<p>C. <u>Tumors and Cancer</u></p> <p>1. Medical report desirable</p> <p>2. Work capacity and work limitations</p>	<p>C. A tumor is a morbid enlargement.</p> <p>1. Medical reports may be secured for all applicants who state they have a tumor or a cancer in order to show whether or not they are employable.</p> <p>2. No generalization can be made here but a determination will have to be made on an individual basis.</p>
<p>D. <u>Diabetes Mellitus</u></p> <p>1. Medical reports</p> <p>2. Work capacity</p>	<p>D. Diabetes mellitus is a disease of metabolism marked by an excess of sugar.</p> <p>1. Medical reports may be secured.</p> <p>2. Work capacity will vary greatly among these applicants and must be determined upon an individual basis.</p>
<p>E. <u>Venereal diseases</u></p> <p>1. Medical reports</p>	<p>E. Venereal diseases are certain diseases such as syphilis and gonorrhea which are contracted by sexual intercourse or other contact with infected persons or may be of congenital origin. Public confidence in venereal disease control will be maintained only if employers do not discriminate against job seekers with syphilis and other venereal diseases.</p> <p>1. Medical reports will determine if the applicant is in an infectious stage.</p>

Points to be Made	Suggested Supporting Material
<p>2. Work capacity and working conditions</p> <p>a. Infectious stage - the critical factor</p> <p>(1) Treatment rapid</p> <p>(2) Non-infectious may not need selective placement</p> <p>(3) Special cautions for syphilis</p>	<p>2.</p> <p>a. If the applicant is in an infectious stage he is unemployable until such time as he becomes non-infectious.</p> <p>(1) Treatment is rapid and this period may be short. It may be wise therefore, to get a second report in 3 or 4 weeks. <u>Exception:</u> Applicants with gonorrhea may be allowed to work if under special medical observation during the administration of sulfanilamide drugs.</p> <p>(2) If person is non-infectious (and no cardiac or other permanent damage has ensued) he is employable and does not even require selective placement.</p> <p>(3) Workers with syphilis, however, in any of its stages, should never be employed in areas of toxic exposure. The late manifestations of syphilis are to be handled according to the body system most severely affected, e.g. heart disease, nervous disease.</p>
<p>3. What to record</p> <p>(During this discussion elicit from the class the key points to be recorded, and develop an INTERVIEWER'S AID for venereal diseases. Note on the blackboard.)</p>	<p>3. Try to avoid use of terms indicating venereal disease, (syphilis, gonorrhea) since they may stigmatize the applicant in the eyes of some interviewers working with his application. In this case the following might suffice:</p> <p><u>Date</u> - Report requested</p> <p><u>Date</u> - Report received - Dr. R. Jones - non-infectious - not handicapped, or</p> <p>Date: Report received - Dr. R. Jones - infectious but under treatment - unable to work now - new report to be secured in 4 weeks.</p>
<p>4. Other considerations</p>	<p>4. The interviewer should be familiar with State and local health laws concerning venereal disease, and with community agencies to which applicants might be referred for treatment.</p>

Points to be Made	Suggested Supporting Material
<p>F. <u>Kidney Ailments</u></p> <ol style="list-style-type: none"> 1. Medical report necessary 2. Working capacity <ol style="list-style-type: none"> a. Toxics dangerous 	<p>F.</p> <ol style="list-style-type: none"> 1. Medical report is desirable for kidney ailments. 2. Working capacity will tend to be lowered for continuous <u>standing</u> and activities performed while <u>standing</u> (<u>pushing, pulling, lifting, carrying, throwing, reaching</u>). a. As far as working surroundings are concerned, exposure to toxic conditions will be carefully investigated to avoid substance which might aggravate a kidney condition. <p>Some toxic substances which might aggravate a kidney condition are:</p> <p>Aniline Benzol and tulnol (2) Carbon disulphide Chlorinated hydrocarbons Lead and its compounds Mercury and its compounds Nitrobenzol and other nitro compounds of benzol and its homologs Radio-active substances and X-rays Turpentine.</p>
<p>G. <u>Glandular Disturbances</u></p> <ol style="list-style-type: none"> 1. Thyroid disturbances <ol style="list-style-type: none"> a. Medical reports b. Working conditions 	<ol style="list-style-type: none"> 1. Among the more common glandular disturbances are thyroid ailments and those which cause abnormality of size. <ol style="list-style-type: none"> a. Medical reports are desirable in thyroid cases. b. The following physical demands items should be considered. <p><u>Working speed</u> - undue pressure may aggravate the condition.</p> <p><u>Sitting</u> - One who is very nervous may be unable to sit for long periods.</p> <p><u>Feeling, fingering, handling</u> - Limitation will depend on extent of tremors, if any</p>

Points to be Made	Suggested Supporting Material
2. Abnormality of size	<p><u>Lifting, carrying, pushing, pulling, throwing</u> - Limitations will depend on degree of emaciation, if any.</p>
a. No medical report	<p><u>Working with or around others, or alone:</u> Degree of contact with others will enter into picture of mental pressure applicant can take.</p>
b. Working conditions	<p><u>Exposure to cold and sudden temperature changes:</u> Dependent on how much applicant sweats.</p>
H. <u>Skin Diseases</u>	<p>2. Midgets and dwarfs can either capitalize on their lack of height by seeking work in cramped quarters which present no problem to them or they can minimize their lack of height by standing on platform or box or by sitting on raised chair.</p>
1. Medical reports desirable	<p>a. A medical report is not necessary.</p> <p>b. Their reaching capacity should be evaluated for any manipulative or machine tending jobs.</p>
I. <u>Cosmetic Defects</u>	<p>For giants, the limitations are reversed and interviewers will try to find jobs in which height is an advantage.</p>
1. Appearance handicaps only	<p>H.</p> <p>1. The interviewer may secure medical report to determine whether the skin condition is contagious or infectious and what the specific irritant is.</p> <p>I. Cosmetic defects refer to appearance handicaps. When appearance handicaps are also functional, such as loss of arm or thickened neck as in goiter, they are discussed elsewhere in this series.</p> <p>1. Cosmetic defects are considered limitations only for those seeking jobs involving public contact. Among these defects are vivid large birth marks or scars on the face or hands, distortion of features, absence of all hair or eyebrows.</p>

Points to be Made	Suggested Supporting Material
<p data-bbox="92 239 291 272">J. <u>Pregnancy</u></p> <p data-bbox="140 469 483 502">1. Working conditions</p> <p data-bbox="190 699 322 732">a. Hours</p> <p data-bbox="190 859 483 958">b. No employment 6 weeks before delivery</p> <p data-bbox="190 993 530 1054">c. Law specifies time after delivery</p>	<p data-bbox="657 239 1445 434">J. Although the labor market rarely necessitates the recruitment or employment of pregnant women, many of them find it necessary to work. Basic requirements governing the selective placement of pregnant women are detailed here as a guide.</p> <p data-bbox="707 469 1445 664">1. In general, pregnant women can follow their usual occupations, unless these involve heavy lifting, hard labor, continuous standing, a good sense of body balance, or are characterized by hazards of severe injury, or exposure to toxic substances.</p> <p data-bbox="757 699 1445 826">a. They should not work on night shifts between 12 P.M. and 6 A.M. and not more than 8 hours a day, with regular rest periods provided, or 48 hours a week.</p> <p data-bbox="757 859 1445 958">b. They should not be employed 6 weeks before delivery or for about 4 weeks after birth.</p> <p data-bbox="757 993 1445 1151">c. Many State Laws specify the number of weeks after delivery in which women should not be employed. Interviewers should become acquainted with the regulations for their States.</p>

Points to be Made	Suggested Supporting Material
<p data-bbox="390 227 508 256" style="text-align: center;"><u>SUMMARY</u></p> <p data-bbox="52 324 571 421">I. <u>Reiteration of the importance of recognizing non-invisible handicaps</u></p>	<p data-bbox="665 324 1463 614">I. We have traced through the considerations for three groups of common handicaps, which are largely non-visible. The important point to remember for all of them is the same as for any handicap, namely, that the unimpaired work capacity remaining with the individual, after all due attention has been given to the effect of his disability, is the important item for consideration in placement work.</p>
<p data-bbox="37 778 541 807">II. <u>Preparation for the 4th day</u></p> <p data-bbox="98 875 284 904">A. Readings</p> <p data-bbox="98 971 284 1000">B. Glossary</p>	<p data-bbox="650 778 1471 846">II. In preparation for the 4th day, ask the group to read the following sections in the handbook:</p> <p data-bbox="715 875 1493 942">A. Part two - Visual handicaps, mental disorders and neurological disorders.</p> <p data-bbox="715 971 1478 1039">B. Remind the group to continue the development of the glossary on 3 x 5 cards.</p>

Instructor's
Discussion Outline

VOCATIONAL ASPECTS OF COMMON DISABILITIES:

(6) VISUAL HANDICAPS, (7) MENTAL
DISORDERS, (8) NEUROLOGICAL DISORDERS

Objective: To continue the presentation of facts about common disabilities, tracing their application to interviewing, classifying, and referring for three more important groups of handicaps.

Outline of

- Main Points:
1. Brief review of the additional steps necessary in the process of placing handicapped workers (5 minutes)
 2. Workers with visual handicaps (115 minutes)
 - a. Facts about visual handicaps
 - b. Application of the medical facts to actual problems in interviewing and classifying
 - c. Matching their work capacity with physical demands
 3. Workers with mental handicaps (90 minutes)
 - a. The two types of mental handicaps
 - b. Facts about mental defectives
 - c. Application of the facts to actual problems in interviewing and classifying
 - d. Matching their work capacity with physical demands
 - e. Facts about mental disorders
 - f. Application of the facts to actual problems in interviewing and classifying
 - g. Matching their work capacity with physical demands
 4. Workers with neurological disorders (30 minutes)
 - a. Medical and vocational facts about neurological disorders
 - b. Application of the medical facts to actual problems in interviewing and classifying
 - c. Matching their work capacity with physical demands

Training Program for Serving
the Handicapped
Unit 4a and 4b
4th Morning and Afternoon

Unit 4a and 4b
Fourth Morning and Afternoon
REMINDERS FOR THE INSTRUCTOR

Materials Needed: 1. Supply of application cards

Points to be Made	Suggested Supporting Material
<p style="text-align: center;"><u>TRANSITION AND MOTIVATION</u></p> <p>* <u>Brief review of the additional steps necessary for the placement of handicapped workers</u> (5 minutes)</p> <p>* (Without noting items on the board, ask the group to repeat the additional facts and items of information needed to do a placement job for the handicapped.)</p> <p>* <u>Transition:</u> The group is ready to continue the same kind of approach to three other common groups of handicaps - the visual, the mental, and the neurological</p>	

<p style="text-align: center;"><u>PRESENTATION</u></p> <p>* <u>Physical facts about visual handicaps</u> (30 minutes)</p> <p>A. <u>Extent of handicap depends upon percentage of sight retained, and upon prognosis</u></p> <p>1. Better eye the criterion</p> <p>2. Various types of impairment</p> <p>a. Diseases of the eye</p>	
<p>I. Vision handicaps cover a wider range of defects than is commonly realized.</p> <p>A. The necessity for selective placement for persons with defects of vision depends upon the percentage of sight a person retains in one or both eyes. The prognosis of the condition may also figure in the matter.</p> <p>1. Generally, the residual sight in the better eye is taken as the criterion for selective placement.</p> <p>2. The loss of vision may consist of (1) a loss of clarity with which an object is perceived, (2) distance at which it may be perceived, (3) the range of the visual field, (total area perceived when both eyes are focussed straight ahead) or, (4) inability of two eyes to act in unison.</p> <p>a. Diseases of the eye may have a prognosis of possible blindness. Some of them are:</p>	

Points to be Made	Suggested Supporting Material
<p>b. Defects in the muscle</p> <p>3. Disease or structure may be cause</p> <p>B. <u>The blind</u></p> <p>1. Work opportunities expanded by mass production</p> <p>2. Work capacities vary</p> <p>3. Other senses sometimes acute</p> <p><u>Transition:</u> The blind will be discussed in detail later in the session.</p>	<p>scleritis, glaucoma, retinitis, optic atrophy, and some inflammations of the middle coat of the eye.</p> <p>b. Structural defects may also warrant selective placement. Very far-sighted applicants will require selective placement: Some cases of extreme near-sightedness (myopia) also require it since all strenuous activities such as <u>lifting</u>, <u>pushing</u>, <u>pulling</u>, <u>jumping</u> or <u>running</u> which might detach the retina are ruled out for such persons</p> <p>3. Reduction in the efficiency of one's sight then, may be due to disease, defects in the external muscle, or defects in the shape of the eye.</p> <p>B. The "blind" must be carefully defined. Some "blind" can "see"; in fact, some might not even be called blind by the uninitiated.</p> <p>1. Mass production methods have increased the opportunities open to the blind and near-blind because many industrial processes have been simplified and routinized.</p> <p>2. Work capacities of the blind will vary as much from individual to individual as will capacities of those with normal sight.</p> <p>3. Some blind persons, however, develop more highly the senses of touch, smell, or hearing in compensation. Their capacity may thus be increased.</p>
<p><u>What is involved in interviewing workers with visual handicaps</u></p> <p>A. <u>Securing the information</u></p> <p>1. From the applicant</p>	<p>II.</p> <p>A.</p> <p>1. Some questions concerning limitation of sight can be answered by the applicant himself. If additional information is desired medical reports may be secured.</p>

Points to be Made	Suggested Supporting Material
<p>2. Medical reports desirable</p> <p>a. Physical demands terminology especially important</p> <p>b. Report not necessary in some cases of removal of an eye</p> <p>c. Blindness in one eye without removal may indicate a report is desirable.</p> <p>d. Medical report desirable in case of disease</p>	<p>2. If medical reports are desired they should be secured from recognized ophthalmologists, oculists or physicians specializing in the disease of the eye.</p> <p>a. Again, this information should be in physical demands terminology as far as possible and should show diagnosis, cause, acuity and field of vision and prognosis (including whether condition is arrested or progressive).</p> <p>b. No report is necessary for applicants who have had an eye removed because of a penetrating wound, if vision in the remaining eye is good.</p> <p>c. Reports <u>are</u> desirable for those who have not had a removal, because of the danger of sympathetic blindness developing in the remaining eye.</p> <p>d. When applicants lose the sight of an eye due to disease (with or without subsequent removal of the eye) a medical report is desirable because an incipient condition may exist in the other eye no matter how long ago the applicant had the disease.</p>
<p>B. <u>Translating medical reports to job language: Introduction of the Snellen Tables</u></p> <p>(Have the group turn to the Snellen Table in the handbook.)</p> <p>1. Snellen Table based on normal vision at 20 feet</p> <p>2. Measure both corrected and uncorrected vision</p> <p>3. The "blind" as defined 20/200</p>	<p>B. Since most medical reports will use the terms of the Snellen Table, the interviewer for the handicapped needs a thorough understanding of it.</p> <p>1. You have all had your eyes tested by reading a chart on the wall. The Snellen Table is based on readings from these charts. The charts are read at 20 feet. That is what 20 on the left side of the table means.</p> <p>2. They can be used to measure both uncorrected and corrected vision.</p> <p>3. If the person can read only the top line of the chart his vision is said to be 20/200. In other words he can read at 20 feet what a normal person can read at 200 feet. His vision is so bad that he is considered to be blind.</p>

Points to be Made	Suggested Supporting Material
<p>4. <u>The industrially blind</u> 20/100</p> <p>5. Vision bad enough to require selective placement, 20/70</p> <p>6. Percentage of vision from conversion table</p> <p>7. <u>Example</u> of medical report in physical demands terminology</p>	<p>4. If a person can read the first two lines his vision is 20/100. In other words he can read at 20 feet what a normal person can read at 100 feet. His vision is so poor that he is considered to be "industrially blind."</p> <p>5. If a person can read the top 3 lines his vision is 20/70 - he can read at 20 feet what a normal person can read at 70. His sight constitutes a problem and he requires selective placement. Persons with vision of 20/20 to 20/60 constitute no problem in placement unless corrected from 20/400.</p> <p>6. If you want to know the percent of vision of someone with 20/60 sight, for example, consult the conversion table at the right of the Snellen Table and you will find it to be 69.9% of normal vision. A person 20/140 vision according to the Snellen Table has 34.2% normal vision.</p> <p>7. A typical medical report on a visual handicap in physical demands terminology might be the following:</p> <p>Man, 35 years of age, miniature painter. <u>Diagnosis:</u> High myopia, bi-lateral <u>Prognosis:</u> Progressive <u>Specific Remarks</u> - Should stop doing close eye work of his present occupation. New occupation should not involve heavy lifting, pushing, pulling, throwing, reaching, and he should not be exposed to vibration.</p>
<p>C. <u>What to record</u></p> <p>* (During this discussion * elicit from the group the key points to be recorded about persons with visual handicaps and develop and INTERVIEWER'S AID for visual handicaps.)</p> <p>1. <u>Examples</u> of what to record</p> <p>*(Refer the group to the *typical application card for a visual handicap,</p>	<p>C. The <u>key points</u> to be remembered and recorded for <u>visual handicaps</u> are the following:</p> <p>(1) Nature of disability, cause, prognosis (2) Eye chart measurement (20/100, 20/200, etc.) (3) Special points to check Field of vision affected? Depth perception affected? Sensitivity to toxics? (4) Conditions to be avoided.</p>

Points to be Made	Suggested Supporting Material
<p>that for a visual handicap, that for <u>Jeanne Rogers</u>, presented as part of Exercise No. 15)</p>	
<p>II. <u>Matching the work capacity of the visually handicapped with the physical demands of jobs</u></p>	<p>III. The key to the placement process for these handicaps lies again in determining the degree of limitation.</p>
<p>What physical demands items are important to consider?</p>	<p>A. Visually handicapped workers can be grouped into categories as follows:</p>
<p>A. <u>Divisions by degree of handicap</u></p>	<p>20/20 to 20/60 - no problem of placement 20-70 to 20/800 - require selective placement</p>
<p>1. The "legally blind" 20/200 or less</p>	<p>1. Within this group 20/100 to 20/800 are industrially blind. Among the industrially blind, those measuring 20/200 to nil are termed "legally blind."</p>
<p>B. <u>Work suitable for certain degrees of vision</u></p>	<p>B. While definite lists of jobs suitable for certain handicaps are never practical, ranges of type of work can be helpful.</p>
<p>1. Wide choice of jobs for 20/70 - 20/100</p>	<p>1. For workers having a corrected vision of 20/70 to 20/100 in the better eye, the range of possible jobs is very wide. Only such jobs as engraving, requiring close and continuous use of the eyes on a fixed point, might prove unsuitable.</p>
<p>2. Jobs for 20/100 to 20/200 those not requiring inspection</p>	<p>2. Those whose corrected vision in the better eye is between 20/100 and 20/200 can fill jobs in which vision is required primarily for guiding movements of the body rather than for inspecting materials or objects.</p>
<p>a. Examples of suitable laundry jobs</p>	<p>a. For example, suitable laundry jobs would be SHAKER or FOLDER in flat work finishing department of a laundry, or BODY PRESSER of shirts or blouses or PACKER, WRAPPER, or SHIPPER.</p>
<p>b. Examples of laundry jobs probably unsuitable</p>	<p>b. The same worker would probably not be suitable for jobs as INSPECTOR, HAND FINISHER, or FOLDER, WEIGHER.</p>

Points to be Made	Suggested Supporting Material
<p>3. Special considerations for those whose vision falls below 20/120</p> <p>a. Other clerical jobs possible</p> <p>b. Most outdoor jobs may be unsuitable</p> <p>c. Need for protection increased with degree of loss</p> <p>4. Work for the blind - 20/200 to nil in the better eye</p>	<p>3. Within this group, workers whose corrected vision in the better eye is worse than 20/120 cannot work continuously with written materials as in stenography or bookkeeping. Typing from copy might be difficult for one whose vision is less than 20/100.</p> <p>a. Other clerical jobs, such as duplicating-machine operator, or dictaphone operator, might be more suitable.</p> <p>b. Most outdoor jobs - skilled, semi-skilled or unskilled - may be unsuitable. Workers in a construction gang, for example, may trip over something on the ground, stumble into a ditch, or get hit by a moving object.</p> <p>c. As the visual loss approaches the threshold of industrial blindness, it becomes increasingly desirable that the person work either in a confined area (factory machine operator, salesman) or in outdoor environment not involving danger, (greenhouse, dairy or poultry farms.)</p> <p>4. The definition of the blind includes those with traveling vision (ability to get about without a guide). Thus, any evaluation of a "blind" person must touch virtually every item in the physical demands schedule. Important working conditions are: adequate lighting, <u>mechanical hazards</u>, <u>moving objects</u>, <u>cramped quarters</u>, <u>high places</u>, <u>exposure to burns</u>, <u>electrical hazards</u>, <u>explosives</u>, <u>radiant energy</u> and <u>working with or around others</u>.</p>
<p>C. <u>Special considerations for diseases of the eye</u></p>	<p>C. Special care will have to be exercised in evaluating the physical activities possible to those whose vision has been impaired slightly by disease, since vision is often important in guiding movement of the body and the hands.</p>
<p>1. Activities to be checked</p>	<p>1. Activities to be checked are: <u>walking</u>, <u>running</u>, <u>jumping</u>, <u>climbing</u>, <u>balancing</u>, <u>crawling</u>, <u>stooping</u>, <u>reaching</u>, <u>throwing</u>, <u>pushing</u>, for example, as well as simple seeing. They should be limited in varying degrees for those whose field of vision has been cut.</p>

Points to be Made

Suggested Supporting Material

2. Working conditions to be checked

2. Exposure to moving objects should be carefully examined. Exposure to toxic conditions may make the optic nerve more vulnerable (as in exposure to lead fumes). Vision itself may be good but may not extend in all directions.

3. Importance of individual prognosis for guidance purposes

3. The individual prognosis must enter into any evaluation of capacity, because some sighted applicants must be guided into occupations they will be able to follow if they lose all vision (as may happen in scleritis, glaucoma, retinitis, optic atrophy, and some inflammations of the middle coat). Even where ultimate blindness is not the prognosis, the interviewer may have to distinguish between what an applicant can do, and what he should do. The latter tends to be less than the former.

D. Special considerations for loss of vision in one eye

D. Vision in only one eye, when loss of vision in other eye has been recent, may cause temporary loss of ability to judge distance. The ability may be re-acquired. During the interim period, such persons should avoid jobs as chauffeur, train operator, camouflage designer, and other jobs involving mechanical hazards, moving objects which may come from the wrong side, or depth perception.

E. Exercise No. 14, "Determining whether workers with visual limitations need selective placement" (60 minutes)

E. Exercise No. 14 has as its objective practice in determining whether or not workers with visual limitations require selective placement.

F. Exercise No. 15, "Recommending special placement considerations for a worker with a visual limitation" (20 minutes)

F. Exercise No. 15 has as its objective provoking consideration of the possibilities for special arrangements on the job to enlarge the employment possibilities of workers with visual limitations.

RECESS FOR LUNCH

Points to be Made	Suggested Supporting Material
<u>PRESENTATION (cont'd)</u>	
<p>V. <u>Two types of mental handicaps</u> (5 minutes)</p> <p>* (Ask the group to recall the * two types, from their reading in the handbook)</p> <p>A. <u>The mental defectives</u></p> <p>B. <u>Mental disorders</u></p> <p>C. <u>Wide difference in problems</u></p>	<p>IV. Mental handicaps may be said to fall into two groups</p> <p>A. The mental defectives are those whose intellectual capacity is limited, usually from birth - those who are termed morons and idiots.</p> <p>B. People with mental disorders are those whose emotions and attitudes are not normal even though intellectual capacity may be very great.</p> <p>C. The problems of placement of the two types of handicapped workers differ widely.</p>
<p>. <u>Facts about mental defectives</u> (10 minutes)</p> <p>A. <u>Difficulties increase with severity of limitations</u></p> <p>* (Ask the group to recall * some jobs requiring very little intellectual capacity.)</p> <p>B. <u>"Mental age" and I.Q. the usual measure</u></p> <p>C. <u>Certain low mentalities not necessarily a handicap in placement</u></p> <p>1. Guidance only may be needed</p>	<p>V. The mental defective group will be considered first.</p> <p>A. Many persons who are termed "mental defectives" because their intelligence falls markedly below the average are able to make good adjustments in society. However, those falling very far below normal often meet with difficulties, particularly at work.</p> <p>B. The usual measure of mental capacity is the Intelligence Quotient, or comparison of the mental age and the chronological age of the individual. The I.Q. score of 100, attained when the mental age and chronological age are the same, is the norm usually cited.</p> <p>C. Applicants with low grade mentalities need not be considered handicapped if they have already found their occupational niche.</p> <p>1. Inexperienced applicants in this group will need to be directed to simple repetitive jobs until they have built up work experience.</p>

Points to be Made	Suggested Supporting Material
<p>VI. <u>What is involved in interviewing mental defectives</u> (15 minutes)</p> <p>A. <u>Getting the information from the applicant</u></p> <ol style="list-style-type: none"> 1. Other causes possible for apparent dullness. 2. Indications of low intelligence 3. Such factors <u>not always</u> an indication of limitation <p>B. <u>Medical reports not necessary</u></p>	<p>VI.</p> <p>A. The interviewer should try to get as much objective data on an applicant as possible before labeling him mentally sub-normal.</p> <ol style="list-style-type: none"> 1. For example: Poor hearing, or another handicap rather than mental dullness may cause an applicant to give answers that are apparently irrelevant. 2. Several possible indications of markedly low intelligence, however, can be used by an interviewer. Among these may be: <ol style="list-style-type: none"> a. ungraded classes in school b. police or mental institution record c. rejection from service in the armed forces. 3. The factors listed above are not in themselves indicative of severe mental limitations, but when coupled with incoherence and inattention during the interview, <u>they may signal a mentally defective condition.</u> <p>B. Medical reports are seldom if ever necessary for mentally limited workers who are looking for jobs.</p>
<p>VII. <u>Matching the work capacity of mentally limited applicants with the physical demands of jobs</u> (5 minutes)</p> <p>A. <u>Working conditions to be checked</u></p>	<p>VII. A proper matching of the work capacity and the demands of the job is particularly important for this group of workers. Jobs can be found that require almost any of the grades of limited intelligence found in the population, but care must be exercised to keep the demands of the job from exceeding the abilities of the individual.</p> <p>A. Particular attention must be paid to the following factors:</p> <ol style="list-style-type: none"> 1. Ability to work <u>with or around others</u> 2. Danger from <u>mechanical or electrical hazards which the applicant may not understand</u> 3. <u>Excessive work speed</u> that may exceed his capacity.

Points to be Made	Suggested Supporting Material
<p>B. <u>Importance of greater supervision</u></p> <p>C. <u>Other handicaps may also be present</u></p> <p>D. <u>Exercise No. 16, "Classifying a mentally limited worker with another handicap."</u></p>	<p>B. Usually, the lower the mental age of a worker the closer and more competent the supervision he requires.</p> <p>C. With mental limitation as with other handicaps a worker may have several disabilities in combination.</p> <p>D. <u>Exercise No. 16, has as its objective the application of principles for the mentally limited, and demonstration of the possibility of other handicaps in combination.</u></p>
<p>VIII. <u>Facts about mental disorders</u></p> <p>* (Ask the group to repeat the * definition)</p> <p>A. <u>General description - a peculiarity of behavior</u></p> <p>B. <u>Frequently of temporary nature, cured when cause is removed</u></p> <p>C. <u>Universality of mental strains</u></p> <p>1. Everyone susceptible</p> <p>2. Example of Anxiety Neurosis</p>	<p>VIII. Mental disorders present perhaps a more complicated placement problem. Mental disorders are defined as conditions in which the emotions and attitudes of the individual are not normal.</p> <p>A. They are characterized by marked peculiarity of behavior, such as excessive excitement, great sadness, confused conversation, hearing of imaginary voices, unfounded fixed suspicions or ideas not susceptible to reason.</p> <p>B. Mental disorders may better be understood when we recall that abnormal mental attitudes are in many instances relieved when the condition causing the aggravation is removed.</p> <p>C. Every person is subject to major emotional stress during his life time. Among these are loss by death of family or friends, disappointment in love, financial difficulties or loss of job security.</p> <p>1. Most people are able to stand these emotional strains, but under too great pressure anyone can become so upset that his behavior is not normal.</p> <p>2. An example of a Navy case history will illustrate this point.</p> <p>A Lieutenant stationed in the Mediterranean was recently released from the Navy with a diagnosis of Anxiety Neurosis. He had a mother, a wife, and a few month's old baby at home. His mother had to be hospitalized with a serious heart condition. His wife contracted pneumonia. There was no other member of the family at home, or to take care of the baby. This man worried so</p>

Points to be Made

Suggested Supporting Material

D. Releases from armed forces for mental illness

1. Many cases return to normal

2. Importance of sound attitude toward discharge for mental reasons

a. Most entirely cured in civil life

b. Confidential treatment

(1) Danger of unwarranted stigma

intensely over the family situation that he was unable to do his military work satisfactorily, and release from duty became necessary.

However, as soon as he was home and was able to make satisfactory arrangements for the care of his family, his mental condition cleared up.

D. Many of the men being released from the armed forces with a blue discharge marked "Section VIII" have been subject to strains of this sort. With such veterans, as well as with similar civilian patients, doctors seek to find the cause of the abnormal mental attitude.

1. In many instances, doctors are able to clear up the disorder, and the person becomes perfectly capable of returning to normal work.

2. The importance of preventing the attachment of any stigma to men discharged for this reason is impossible to overstress.

a. Most of these discharges indicate that the individual was not adequate to military life - a very different thing from civilian life.

b. Popular attitudes toward mental disorders require that extreme care be taken to prevent members of the community from learning technical reasons for this type of discharge from the armed services. Interviewers from the Employment Service must not disclose information of this nature in their possession.

(1) Otherwise, veterans entirely cured and functioning in a normal manner would be disadvantaged by the persistence of the stigma attached to mental illness.

Points to be Made

Suggested Supporting Material

E. General social attitude toward mental disorders

1. New and experimental field
2. Slow change in social attitude
3. The present enlightened medical practice
4. Importance of work as therapy
5. Interviewer's professional attitude

F. Classifications of the mentally ill

1. Michigan Industrial Mental Health Council classification
2. Psychotics and psychoneurotics require selective placement

E.

1. Selective placement of applicants with mental disorders is a new and experimental field. Our body of information is limited, but the Employment Service is building up experience similar to that now amassed for the placement of the physically handicapped.
2. The interviewer working with the mentally handicapped must constantly remember that social attitudes change slowly. The traditional attitude toward the mentally sick is one of fear, impatience, or even anger.
3. New frontiers in psychiatry and constantly improved medical practices frequently make possible complete cures.
4. In many of these cures a satisfactory work adjustment is an important factor.
5. Interviewers, as professional workers, must overcome any attitude of fear toward job seekers with mental disorders. They need a constantly enlarging background of facts of the nature of the mental disorders and the kinds of work in which many of these applicants will satisfactorily perform.

F. Doctors have established many classifications which attempt to describe the entire population on the basis of mental health. Any attempt to classify human beings will result in considerable overlapping. One system has proved especially useful, however.

1. This system is the one advised by the Michigan Industrial Mental Health Council. The classifications are:
 - a. The psychotic
 - b. The psychoneurotic
 - c. The chronic maladjusted
 - d. The normal
2. Only people who fall within the first two classifications are considered sufficiently handicapped to require the service of an interviewer who specializes in the additional techniques necessary for the handicapped.

Points to be Made

a. Principles for determining need for selective placement

(1) Experience may be determining

(2) Behavior in the office a clue

(3) Employer restrictions may necessitate selective placement

G. Attributes of the psychotic

1. Definition: require hospitalization

2. Two important psychoses

3. Characteristics of the schizophrenic

Suggested Supporting Material

a. Some guiding principles for determining which persons with mental disorders need selective placement are:

(1) An applicant with little or no experience subsequent to release from a mental hospital is handicapped.

An applicant with satisfactory work experience subsequent to discharge need not be considered handicapped if his behavior in the office seems normal.

(2) Those who never were institutionalized or treated but are known to be mentally ill, through draft status or discharge from the armed forces, are not considered handicapped if they have had a satisfactory work record and behavior in office seems normal.

(3) In areas where employers categorically restrict the hiring of workers with mental problems, workers will be considered handicapped because of employer attitude.

G.

1. The psychotic person is one with a serious, totally disorganizing complaint which requires hospitalization. These individuals usually do not realize they are ill. They are sent to mental institutions when the disorganization becomes marked, and released when their symptoms diminish or disappear.

2. The two most important types of psychoses are: schizophrenic (dementia praecox) and manic depressive.

3. Schizophrenic means split personality (from the Greek "schizo", meaning cut or split).

Points to be Made	Suggested Supporting Material
<p>a. Retirement to world of delusion</p> <p>b. May lack energy</p> <p>c. May be abnormally suspicious</p>	<p>a. A schizophrenic is a shy, retiring type of person who withdraws from reality to the world of a delusion. Here he assumes a more dominating personality such as the King, the President, Queen Elizabeth, etc.</p> <p>b. Some schizophrenics lack physical and mental energy and can engage only in menial work with a minimum of thinking, action or feeling.</p> <p>c. Some blame others, are constantly suspicious, and think other people are conspiring to hurt them. Some of this latter type may be able to conceal their condition and make good workers when not acutely troubled.</p>
<p>4. Characteristics of the <u>manic depressive</u></p> <p>a. Complete cure possible</p> <p>Recovered patients not handicapped</p> <p>b. Early onset may create permanence of handicap</p>	<p>4. The manic depressive type is characterized by alternating periods of exultation and depression.</p> <p>a. Manic depressives can be completely cured. About 50% of the cures have no recurrence, particularly if the illness started after the age of 35.</p> <p>Those who have recovered should not be considered handicapped if they have had a steady work record since discharge from the hospital and if the behavior in the employment office seems normal.</p> <p>b. However, if a medical report shows that the illness started at adolescence and has recurred at intervals, the applicant is considered handicapped.</p>
<p>H. <u>Attributes of the psychoneurotic</u></p> <p>1. Extent - 5-10% of the population</p> <p>2. Recovery variable</p>	<p>H. The <u>psychoneurotic</u> are people with <u>minor disorders of the mind</u> causing only partial disorganization.</p> <p>1. Psychoneurotics constitute 5% to 10% of the population at any one time.</p> <p>2. The prognosis varies widely. Some recover entirely, some become chronic psychoneurotics, some may develop a full-fledged psychosis.</p>

Points to be Made	Suggested Supporting Material
<p>3. Those with fears and compulsions</p> <p>a. Frequently job seekers</p>	<p>3. Psychoneurotics are constantly beset by fears, (of high places, of riding on wheel or of being shut in) or they may be victim of compulsions and decisions which make life uncomfortable and social relations a constant trial.</p> <p>Some examples of compulsions are those affecting people who are compelled repeatedly to perform an overt physical act (such as washing of hands) or some mental act (such as counting by 7 whenever they see that number).</p> <p>a. Most such psychoneurotics never get into an institution. They are the group most frequently met in placement situations. Their disability very often does not prevent them from doing a good job. Thus they are employable if they can control their actions and not appear inattentive or remain away from work too frequently.</p>
<p>4. Those who convert mental conflict into physical complaint</p> <p>a. Work capacity varies with part affected</p>	<p>4. Still another group of psychoneurotics convert a mental conflict into a physical complaint, usually located in the gastrointestinal tract.</p> <p>a. Work capacity for such applicants must be evaluated in terms of the part of the body affected and attitude of the worker toward his ailment. For example, a neurasthenic who has kidney complaint, <u>may be limited in lifting, pulling, pushing, and similar activities</u>, not because he has any serious illness of these parts, but because he thinks he has.</p>
<p>5. Those who fear imminent death</p>	<p>5. Still another group have spells during which they feel death is imminent. During this period they must sit or lie down. People with this form of the illness tend to dramatize themselves so that the spells are more apt to occur in the presence of an audience.</p> <p>The necessary physical information on psychoneurotics of this kind will include data on the frequency and duration of the spells as well as an evaluation of how well the applicant can work with other people around.</p>

Points to be Made

Suggested Supporting Material

IX. What is involved in interviewing workers with mental disorders

A. Securing information

1. From the applicant

a. Importance of undivided attention to the individual

b. Some points to observe

2. From medical reports

a. Typical medical report

(Read to the group typical medical report for a psychoneurotic applicant, Mary Vance.)

B. What to Record

1. Technical terms avoided

a. Notations reflect the interviewer's observations

A.

1. In interviewing the mentally ill, the interviewer should always speak quietly and maintain great calm. He should never express surprise at what the applicant says no matter how startling the revelation or the apparent threat to himself.

a. An important point or technique is to act in such a way that the applicant feels that he himself is the only interest that the interviewer has at the moment.

b. Some of the characteristics which may be observed during the interview and that may indicate mental illness are irritability, over-aggressiveness, pronounced excitement, marked suspicion, and confused conversation.

2. A medical report is important because no applicant should be considered handicapped because of a mental disorder except on the basis of a medical report. Medical reports should be secured if possible for psychotic and psychoneurotic applicants.

a. A typical medical report is that of Mary Vance (attached).

B.

1. On the application card, the use of technical terms such as those in this discussion are probably best avoided.

a. Rather than use the name of the psychosis or the psychoneurosis, the interviewer will make his notations in terms of the applicant's relations with others.

Points to be Made	Suggested Supporting Material
<p>b. Example of notations for a schizophrenic</p> <p>2. Institutional record to be noted</p> <p>3. Cause stated by doctor</p> <p>4. Special irritants</p>	<p>b. For example: If a medical report diagnoses a person as schizophrenic, his appearance to the interviewer is probably retiring, shy, or withdrawn. These observable attributes should be recorded on the card.</p> <p>2. If he has been in an institution, the card can carry the fact that he had a nervous breakdown, the time it occurred and that he is sufficiently recovered to seek work.</p> <p>3. Any cause that the doctor has been able to determine should be clearly stated, as for example: "Had nervous breakdown upon death of wife."</p> <p>4. Any particular irritant that upsets the applicant should appear on the application card as a condition to be avoided.</p>
<p>X. <u>Matching the work capacity of applicants with mental handicaps to the physical demands of jobs</u></p> <p>A. <u>Environment an important factor</u></p> <p>1. Importance of individual attention</p> <p>B. <u>Many mentally ill placeable</u></p> <p>1. Assistance available from social agencies in some communities</p> <p>2. Some on "parole" may work</p>	<p>X.</p> <p>A. Successful placement of the mentally handicapped depends largely upon finding the proper working environment for the individual. Generalizations other than this cannot be made.</p> <p>1. Each case must be considered individually with full weight given to the recommendations in the medical report.</p> <p>B. If the particular mental illness does not indicate any violence toward others or toward himself, a mentally sick person may work satisfactorily, provided his peculiarities are known and understood by his fellow workers.</p> <p>1. Wherever possible, placement interviewers should work very closely with psychiatric social workers in the community.</p> <p>2. Persons on "parole" or on "leave" from mental institutions may be placed if medical report so indicates.</p>

WAR MANPOWER COMMISSION
BUREAU OF MANPOWER UTILIZATION

Budget Bureau No. 11-2088.1
 Approval Expires March 31, 1944

Division of Occupational Analysis and Manning Tables

PHYSICAL CAPACITIES APPRAISAL

Name Mary Vance Age 32 Sex _____ Height _____ Weight _____

PHYSICAL ACTIVITIES			
<input checked="" type="checkbox"/> 1	Walking	16	Throwing
<input type="checkbox"/> 2	Jumping	17	Pushing
<input type="checkbox"/> 3	Running	18	Pulling
<input type="checkbox"/> 4	Balancing	19	Handling
<input type="checkbox"/> 5	Climbing	20	Fingering
<input type="checkbox"/> 6	Crawling	21	Feeling
<input checked="" type="checkbox"/> 7	Standing	22	Talking
<input type="checkbox"/> 8	Turning	23	Hearing
<input type="checkbox"/> 9	Stooping	24	Seeing
<input type="checkbox"/> 10	Crouching	25	Color Vision
<input type="checkbox"/> 11	Kneeling	26	Depth Perception
<input type="checkbox"/> 12	Sitting	27	Working Speed
<input type="checkbox"/> 13	Reaching	28	
<input type="checkbox"/> 14	Lifting	29	
<input type="checkbox"/> 15	Carrying	30	

WORKING CONDITIONS			
<input type="checkbox"/> 51	Inside	66	Mechanical Hazards
<input type="checkbox"/> 52	Outside	67	Moving Objects
<input type="checkbox"/> 53	Hot	68	Cramped Quarters
<input type="checkbox"/> 54	Cold	69	High Places
<input type="checkbox"/> 55	Sudden Temp. Changes	70	Exposure to Burns
<input type="checkbox"/> 56	Humid	71	Electrical Hazards
<input type="checkbox"/> 57	Dry	72	Explosives
<input type="checkbox"/> 58	Wet	73	Radiant Energy
<input type="checkbox"/> 59	Dusty	74	Toxic Conditions
<input type="checkbox"/> 60	Dirty	75	Working With Others
<input type="checkbox"/> 61	Odors	76	Working Around Others
<input type="checkbox"/> 62	Noisy	77	Working Alone
<input type="checkbox"/> 63	Adequate Lighting	78	
<input type="checkbox"/> 64	Adequate Ventilation	79	
<input type="checkbox"/> 65	Vibration	80	

DETAILS OF PHYSICAL ACTIVITIES: Blank space = Full Capacity; / = Partial capacity;
 X = No capacity

May lift, carry, handle, push or pull up to _____ pounds per hour
 May engage in activities numbered _____ up to 2/3 of work period
 May engage in activities numbered _____ up to 1/3 of work period
 Sight: _____
 Hearing: _____
 Others: _____

DETAILS OF WORKING CONDITIONS:

Diagnosis: Conversion hysteria manifested by numbness and weakness of left leg.

Prognosis: Fair

Specific Remarks: Can walk and stand more than she thinks but change to seated work at this time might be of therapeutic value.

Date _____ 194__

Physician _____

Points to be Made	Suggested Supporting Material
<p>XI. <u>Exercise No. 17 - classifying and recommending work for the mentally ill</u> (15 minutes)</p> <p>* <u>Transition</u>: The next category of handicaps, neurological disorders, is quite separate from the ones just considered.</p>	<p>XI. Exercise No. 17 has as its objective the application of the principles for placing the mentally ill, with special reference to veterans.</p>
<p>XII. <u>Neurological Disorders</u> (5 minutes)</p> <p>A. <u>Nature of the nervous system</u></p> <p>B. <u>Diseases of the nerves</u></p> <p>* (Ask the group to name some neurological disorders)</p> <p>* <u>Transition</u>: The following sections of the discussion will concentrate upon the most significant aspects of certain neurological disorders that frequently occur among workers. Each one will be described briefly and the most essential points for placement workers will be noted.</p>	<p>XII.</p> <p>A. The nervous system is the all-important messenger service of the body. Nerves carry impulses from outside stimuli to the brain and from the brain to the muscles. Thus the nerves govern sensation and motion.</p> <p>B. Damage to the nerves causes a neurological disorder, which may be one of many types, ranging from epilepsy to neuritis.</p>
<p>XIII. <u>Neuritis</u></p> <p>A. <u>Physical facts</u></p> <p>* (Ask the difference between neuritis and neuralgia)</p> <p>1. Prognosis: Good</p>	<p>XIII.</p> <p>A. Neuritis is inflammation of a nerve, usually resulting in loss of reflexes, function or sensation. (<u>Neuralgia</u> is simply acute pain in the nerve, with no loss.) Neuritis can result from infectious diseases, injury, alcoholism, or poisoning.</p> <p>1. It has a high rate of cure, although the condition may last from 6 months up to 2 years before being cured.</p>

Points to be Made	Suggested Supporting Material
<p>2. Type of loss suffered</p> <p>3. Neuritis of the face (Bell's Palsy)</p> <p>B. <u>Information to be secured</u></p> <p>1. From the applicant</p> <p>a. For arms</p> <p>b. For legs</p> <p>c. For torso</p> <p>2. From medical reports <u>only rarely</u></p>	<p>2. Persons with neuritis may lose their sense of touch in the fingertips, or the loss may extend up to the hands. Pain may accompany this loss. If there is an involvement of the motor nerves, the muscles in the arms and legs may become weak, some even completely paralyzed.</p> <p>3. Bell's palsy is neuritis of the motor nerve supplying the face, which should clear up in a few days or weeks. If it takes longer, residual symptoms (twisted mouth, one eyelid closed, etc.) may limit function or constitute an appearance handicap.</p> <p>B.</p> <p>1. The interviewer will check pertinent items among the following:</p> <p>a. <u>Feeling, fingering, handling</u>, and all other activities involving use of the hands (<u>pushing, pulling, reaching, carrying, lifting, throwing</u>) if hands are affected.</p> <p>b. <u>Walking, jumping, running, kneeling, standing, crouching</u>, if the legs are particularly affected.</p> <p>c. All the foregoing and <u>stooping, running, balancing</u>, if the torso is affected.</p> <p>2. Medical reports are seldom necessary.</p>
<p>IV. <u>Encephalitis</u></p> <p>A. <u>Physical facts</u></p> <p>1. Prognosis: Poor</p> <p>2. Manifestations left</p>	<p>XIV.</p> <p>A. Encephalitis is an infectious but not contagious inflammation of the brain. The cause is unknown, and it affects young and old.</p> <p>1. Prognosis is poor. Less than 20% die, but 60 - 70% show permanent ill-effects.</p> <p>2. The ill-effects may be any of the following: tics, spasms, rhythmic, tremors, clamping jaws, chorea (St. Vitus' dance movements) nystagmus, narcolepsy (sudden attack of sleep), some forms of psychoses, conduct disorders, or catatonia.</p>

Points to be Made	Suggested Supporting Material
<p>3. May be employable</p> <p>B. <u>Securing the information</u></p> <p>1. From the medical reports if possible</p> <p>C. <u>Work capacity shows wide variations</u></p>	<p>3. In spite of these possibilities those who recover are often placeable.</p> <p>B.</p> <p>1. While many post-encephalitics are employable, medical reports are desirable to show how much working capacity is left.</p> <p>C. There are no generalized work limitations for post-encephalitics, since residual effects vary widely.</p>
<p>IV. <u>Multiple Sclerosis</u></p> <p>A. <u>Physical facts</u></p> <p>1. Manifestations</p> <p>2. Not always employable</p> <p>B. <u>Securing the information</u></p> <p>1. From the medical reports if possible</p> <p>C. <u>Work capacity varies with symptoms</u></p>	<p>XV.</p> <p>A. Multiple sclerosis is a disease marked by hardening occurring in sporadic patches throughout the brain or spinal cord or both. It is incurable, slowly progressive, but at an irregular pace, and may last many years. It is sometimes known as Lou Gehrig's disease.</p> <p>1. It is accompanied by some or all of the following symptoms: Weakness, incoordination, jerking movements of legs, and especially of the arms, abnormal mental exaltation, scanning speech, nystagmus, even temporary attacks of blindness, double vision, or blocked out fields of vision.</p> <p>2. These individuals are not always employable.</p> <p>B.</p> <p>1. Medical reports are desirable to show whether the applicant is employable, and if he is, just how much he may be permitted to do.</p> <p>C. Working capacity will be evaluated in terms of items pertinent to the applicant's particular symptoms (e.g. where field of vision is impaired, check activities where eyes are used to guide bodily movement - <u>reaching</u>, <u>stooping</u>, <u>walking</u>, etc.</p>

Points to be Made	Suggested Supporting Material
<p>I. <u>Epilepsy</u></p> <p>A. <u>Physical facts</u></p> <ol style="list-style-type: none"> 1. Total cure rare, but good life expectancy 2. Two types of attack <ol style="list-style-type: none"> a. Grand mal <ol style="list-style-type: none"> (1) May be violent b. Petit mal <ol style="list-style-type: none"> (1) Usually very brief c. Epileptic equivalents 3. Possible personality effects 	<p>XVI.</p> <p>A. Epilepsy is a disease marked by sudden loss of consciousness, brief or prolonged, usually but not always accompanied by convulsions. Epilepsy usually develops before puberty or before the age of 20. It may come after 45 due to arteriosclerosis of the brain, or at any age as a result of injury or illness (encephalitis, meningitis, effects of toxins such as alcohol or lead, or of brain hemorrhages in whooping cough).</p> <ol style="list-style-type: none"> 1. Chances of total cure are slight (10%) but life expectancy is good. 2. Attacks are of two types: <ol style="list-style-type: none"> a. Grand mal (major epilepsy): convulsions followed by coma or loss of consciousness. Some have a warning or aura of attack either a day or a few minutes before, others have no warning at all. The attack may be quite violent, causing the person to fall, perhaps crying out involuntarily as he does so, or to become rigid, then jerk about uncontrollably. After the convulsions, the person may fall into a deep sleep, or may just wander around until the spell passes. b. Petit mal (minor epilepsy): the person suddenly becomes helpless. Neither fall nor convulsions occur as a rule, and the auras such as described under grand mal are rare. The attack lasts a few seconds. It may consist simply of yawning violently, or staring straight ahead, or some parts of the body may start to twitch. Loss of consciousness is not very deep. Petit mal may, after many years, develop into grand mal. c. Epileptic equivalents (or psychic seizures) are disturbances of consciousness without convulsive movements. In this type the person performs an act without purpose and without recollection afterwards. 3. Between attacks, some epileptics suffer intellectual and character changes. They may tend to become unsocial, selfish, irritable, and to suffer memory defects.

Points to be Made

Suggested Supporting Material

4. Common misapprehensions: importance of understanding true facts
 - a. Very few congenital idiots
 - b. Many geniuses
 - c. Constant improvements in treatment

B. Securing the information

1. From medical reports if possible

The reason is not hard to find. Parents of young epileptics tend to spoil them for fear of "bringing on a fit"; playmates tag them with unkind names like "jerky" or "dopey." Adult epileptics nervously fear they will lose their jobs and friends when they have an attack.

4. If society could lose its superstitious fears about epilepsy, an important step forward would be taken. Some of the facts that might enlighten people are:
 - a. Only a small proportion of epileptics are congenital idiots. In fact 60 - 80% are normal mentally.
 - b. Some have become very famous people: Julius Caesar, Peter the Great of Russia, Byron, Dostoyevski, Flaubert, Swinburne, de Maupassant, Paganini.
 - c. New scientific methods of treatment are constantly being evolved. These diminish the severity of attacks or ward them off almost entirely. They cannot yet, however, be said to cure epilepsy, since attacks return if medication is stopped, just as happens to the diabetic who forgets his insulin.

B.

1. Medical reports are desirable for applicants who state they have epilepsy. Some applicants however will attempt to conceal this fact. Medical reports if secured should be in physical demands terminology. In addition they should indicate:
 - a. type, frequency and duration of attack
 - b. whether applicant gets an aura of warning
 - c. how long applicant takes to sleep off final stage of spell, if he goes through this phase at all.
 - d. whether spell occurs at any set time of day or night (thus an epileptic with night seizures only is a pretty good bet for day work).
 - e. whether any mental deterioration has resulted.

Points to be Made	Suggested Supporting Material
<p>2. From the applicant</p>	<p>2. The interviewer should be on the alert for references to "spells," "fainting," or "attacks" or expressions of fear or distaste for work with moving machinery, especially when coupled with an erratic work history. Occasionally, an applicant will present visible evidence of a recent attack in the form of bruised parts of the face, or a scarred tongue.</p>
<p>C. <u>Matching the work capacity of epileptics to the physical demands of the jobs</u></p> <p>1. May be unemployable if spells are frequent</p> <p>2. The importance of working conditions</p> <p>a. Hazards</p> <p>b. Aura may be a partial protection.</p> <p>3. Importance of individual consideration</p> <p>4. Desirability of placement in pairs</p>	<p>C. A number of factors can be described to guide the proper placement of epileptics.</p> <p>1. Epileptics who have very frequent seizures at unpredictable hours are unemployable. The type of spell alone is not a determining factor, for a person with grand mal who has only one seizure in three years is certainly capable of working.</p> <p>2. Working conditions as a whole do not aggravate attacks unless the history of a case shows seizures came when the person was under mental stress due to job pressure. Some working conditions, however, most epileptics should avoid because of the danger of injury during an attack.</p> <p>a. These are: <u>mechanical hazards, moving objects, high places, exposure to burns, and cramped quarters.</u></p> <p>b. Even these conditions need not be entirely eliminated for those epileptics who get sufficient warning of an attack to leave their work and lie down somewhere in the plant. About half of all epileptics get such an aura but it may not be reliable and there is always the possibility of a seizure with no aura.</p> <p>3. Epileptics must be judged individually. Some have seizures many years apart; some have them only at night.</p> <p>4. Experience has demonstrated the desirability of placing epileptics in pairs, so that one may attend the other (by placing an object between the back teeth to prevent biting the tongue, or putting a pillow or folded coat under the head) in case of a seizure.</p>

Points to be Made	Suggested Supporting Material
<p>5. Safeguard of others</p>	<p>5. In general, epileptics should be placed where they will not injure others should they have an attack.</p>
<p>XVII. <u>Spastic Paralysis - (a form of Cerebral Palsy)</u></p> <p>A. <u>Physical facts</u></p> <ol style="list-style-type: none"> 1. May be confined to small area, or general 2. Manifestations, usually in combination 3. Erroneous idea that they are mentally defective <p>B. <u>Securing information</u></p> <ol style="list-style-type: none"> 1. From the applicant 	<p>XVII.</p> <p>A. Spastic paralysis is marked by rigidity of the muscles and heightened tendon reflexes in many parts of the body. It may be due to a brain lesion suffered at birth, or to poisoning or accidents to the cardiovascular system (as in apoplexy).</p> <ol style="list-style-type: none"> 1. While some persons have only a mild spasticity confined to just a few parts of the body, others may have more marked and wide-spread paralysis, even to a point where they become totally unemployable. 2. Some of the outward evidences of spastic paralysis are: speech defects, grimaces, head movements, hand tremors (spastic handwriting is easily identified by its shakiness and uneven character), awkward position of arms, of limbs and defective gait (scissor walk, walking on tip toes, shuffling, etc.) <p>A spastic usually has a combination of some rather than all of the above characteristics. Some may have head and facial defects only, others may have just arm and leg disabilities.</p> <ol style="list-style-type: none"> 3. Because of their facial contortions and speech difficulties, spastics have erroneously been labelled mentally defective in the past. Only a relatively small number are so affected, however. Many are very bright and achieve a good deal through sheer will power. <p>B.</p> <ol style="list-style-type: none"> 1. The interviewer can check certain information in the course of the interview. Key points for him to observe will depend upon the part of the body affected by the disease.

Points to be Made	Suggested Supporting Material
<p>a. Key points for legs important</p> <p>b. Points for hands</p> <p>c. Points for speech</p> <p>2. From medical reports only rarely</p>	<p>a. For legs, the interviewer can observe the gait as the applicant approaches desk. Observation plus questioning should reveal how much <u>standing</u>, <u>walking</u>, <u>running</u>, <u>stooping</u>, <u>turning</u>, <u>crouching</u>, <u>kneeling</u>, <u>crawling</u>, <u>climbing</u>, <u>balancing</u>, <u>jumping</u>, if any, he can do. His balance may be precarious depending on degree of disablement. <u>High or cramped working places</u>, <u>expoosure to mechanical hazards</u> and <u>moving objects</u> may be ruled out.</p> <p>b. For arms, the interviewer can have applicant demonstrate ability to finger, handle, lift and carry objects by signing his name, picking up and unbending a given number of clips, lifting all the interviewer's dictionaries and manuals and placing them on another part of the desk.</p> <p>c. The interviewer should observe the applicant's speech carefully for clarity.</p> <p>2. A medical report for an applicant who has suffered with spastic paralysis from childhood is usually unnecessary, as most of the activities can usually be evaluated in the employment office.</p>

XVIII. Other types of Cerebral Palsy

A. Athetosis

1. Never deteriorate mentally

B. "Strokes" of paralysis

1. Medical report desirable to determine employability

XVIII.

- A. Another type of spastic paralysis is athetosis. This condition, too, is usually caused by a birth injury but its effects are flaccidity of muscles rather than tenseness.

1. Athetoids grimace more than spastics but never deteriorate mentally.

B. Many strokes are a form of cerebral palsy.

1. Medical reports are desirable to determine whether or not the applicant is employable. If he is employable, the report should show what the residual effects are and how they limit work capacity. Thus spastic paralysis of certain parts (head, arms, or legs, or any combination) may be a residuum of a stroke.

Points to be Made	Suggested Supporting Material
<p>2. Paralysis of one-half of the body</p> <p>C. Parkinson's disease (Shaking palsy)</p> <p>1. Example of what to record for a neurological disorder</p> <p>(Read typical application card for a worker with <u>shaking palsy</u>, that for John Main. Note the significant points on the blackboard.)</p>	<p>2. Hemiplegia (paralysis of one-half of the body from head to foot) is an illustration.</p> <p>C. Parkinson's disease or shaking palsy (paralysis agitans) is a disease of late life, progressive in character and marked by mask-like facial appearances, tremor, slowing of voluntary movements, a tendency to walk quickly, peculiar posture and muscular weakness.</p> <p>1. The application card for John Main, on following page, typifies the entries for a worker with shaking palsy.</p>

SUMMARY

<p>I. <u>Reiteration of the importance of a widening technical background</u></p> <p>A. <u>Experience and personal effort</u></p> <p>B. <u>Limits on medical information</u></p>	<p>I. The survey of common handicaps just concluded gives the bare minimum of information an interviewer needs for specializing in the placement of the handicapped.</p> <p>A. Experience in the work itself will constantly widen the interviewer's background. He must, however, develop his own range of information by constant reading just as the physician does to keep abreast of medical developments.</p> <p>B. While the placement worker uses medical information in a comparatively limited way, being interested only in its occupational implications, he can never have too much accurate data about disabilities and diseases. At the same time he must constantly guard against allowing his technical background to lead him to attempt diagnosis.</p>
<p>II. <u>Reiteration of the importance of individual consideration</u></p>	<p>II. One point is paramount in a proper understanding of the materials covered in this discussion: Individual consideration of each worker in terms of what he can do and each job in terms of what it requires, is the only proper basis for placement of handicapped workers.</p>

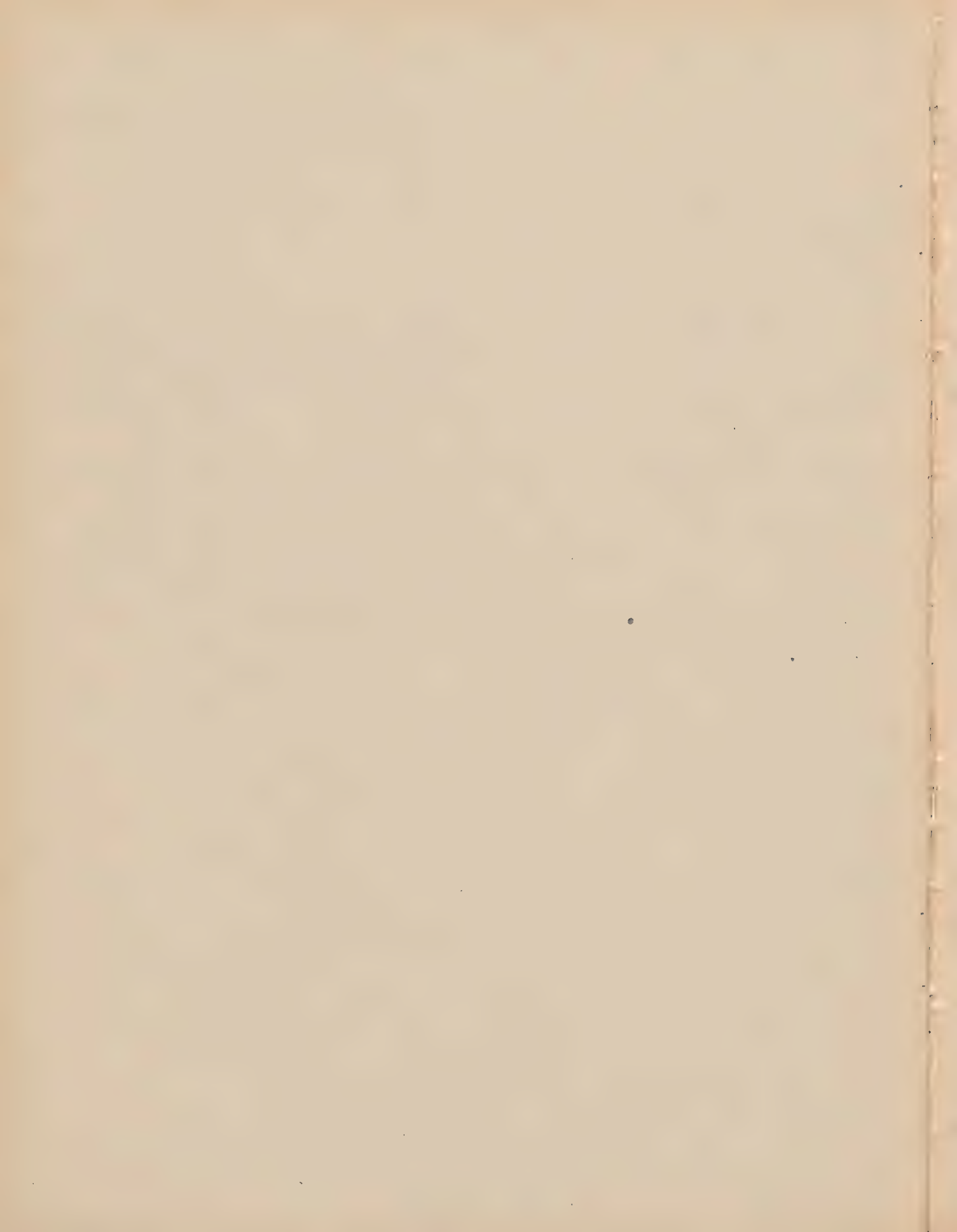
SPECIAL INFORMATION

COMMENTS

INTERVIEWER

USES-511 (10-42)

Points to be Made	Suggested Supporting Material
A. No "canned" job lists possible	A. It is impossible to predict in advance that a certain handicap should be matched with a certain job. An effective matching can only be done on an individual basis.
<p>III. <u>Preparation for the fifth day</u></p> <p>A. <u>General summary of placement techniques</u></p> <p>B. <u>Points for veterans</u></p> <p>C. <u>Readings</u></p>	<p>III.</p> <p>A. The next discussions will be devoted to a general review of methods found effective in the placement of handicapped, without regard to any particular disabilities. Much of the material will cover points of technique already considered as individual handicaps were discussed.</p> <p>B. Special considerations affecting the placement of veterans will be stressed.</p> <p>C. In preparation for the discussion the group should read sections in the Handbook on <u>Disabled Veterans</u> and on <u>Laws</u> and consider any questions they want to bring up in the course of the session.</p>



Instructor's Discussion Outline

REVIEW OF BEST METHODS FOR PLACEMENT OF THE HANDICAPPED AND ASSISTANCE TO THOSE NOT IMMEDIATELY PLACEABLE

Objective: To review the best methods for placement of the handicapped, as previously presented in the earlier discussions; and to present the other sources of assistance available to handicapped workers not immediately employable.

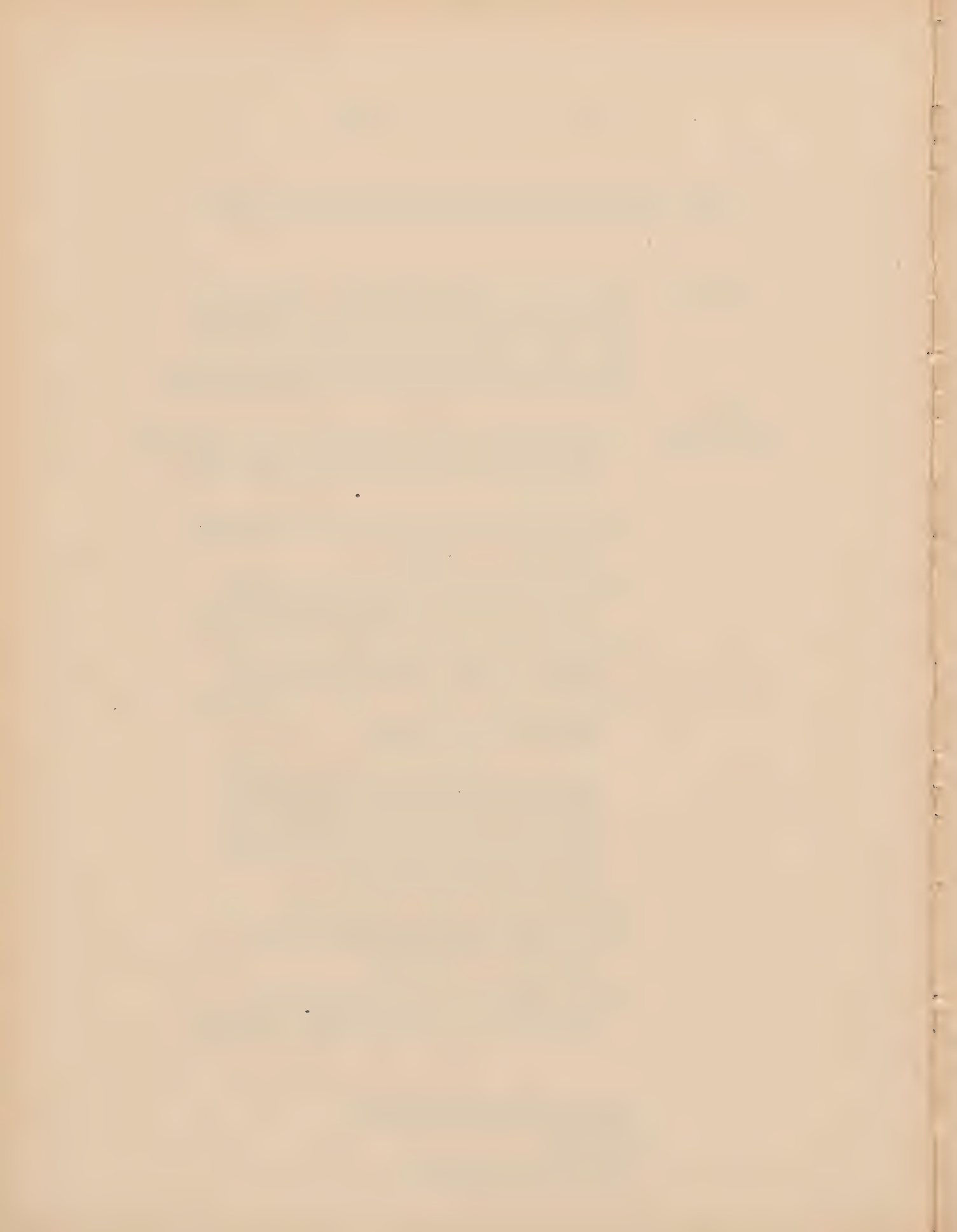
- Outline of Main Points:**
1. Brief review of the elements in the application and placement process for the handicapped (5 minutes)
 2. Review of best techniques for uncovering handicaps (15 minutes)
 3. Review of best techniques for securing information from applicants (30 minutes)
 4. Review of the considerations involved in securing medical reports (45 minutes)
 5. Review of the best practices in recording information (10 minutes)
 6. Review of best techniques in matching physical capacities with the physical demands of jobs including the use of occupational information and techniques for persuading employers to hire the handicapped (40 minutes)
 7. Presentation of the possibilities for handicapped workers not immediately employable (40 minutes)
 8. Brief survey of laws relating to the employment of the handicapped (10 minutes)

Training Program for Serving the Handicapped

Unit 5-a

Fifth Morning (3 hours)

Afternoon (1½ hours)



Unit 5-a

Fifth Morning

REMINDERS FOR THE INSTRUCTOR

The section on agencies concerned with rehabilitation may well be conducted by a representative of the State Bureau of Rehabilitation. Such arrangements will have to be made well in advance of the session.

Materials

1. Any State or local laws or ordinances.
2. Lists of agencies operating locally, in the form of directories if possible.

Points to be Made	Suggested Supporting Material
<p style="text-align: center;"><u>TRANSITION AND MOTIVATION (5 minutes)</u></p> <p>I. <u>Reiteration of necessity for special additional techniques for the handicapped</u></p> <p>II. <u>Review of the elements in the process of placing the handicapped</u></p> <p>* (Ask the group to list the steps in the placement of the handicapped, and note the items on the board as they are mentioned.)</p> <p>A. <u>Purpose of this session--</u> <u>A recapitulation of methods</u></p>	
	<p>I. During these sessions the special additional techniques and information necessary for the proper placement of the physically and the mentally handicapped have been reviewed.</p> <p>As each special disability was considered the points of technique involved in placing such applicants were treated one by one.</p> <p>II. A listing of the steps in the process of placing the handicapped will probably include the following titles:</p> <p><u>Uncovering a handicap</u></p> <p><u>Securing information from applicants and from medical reports</u></p> <p><u>Classification</u></p> <p><u>Matching work capacities with physical demands</u></p>

<p style="text-align: center;"><u>PRESENTATION</u></p>	
<p>I. <u>Review of Special Techniques for Uncovering Handicaps</u> (15 minutes)</p> <p>* (This point and the following points concerning the placement process can probably be developed by means of questions to the group, with the instructor noting the responses briefly on the board where appropriate. The information itself has all been presented in the preceding discussions.)</p>	<p>I. Following are the points of good technique that will probably be mentioned by the group:</p> <p>A. <u>Careful phraseology of the questions concerning physical condition, such as "Is there any work you cannot do because of your physical condition?" "Could you pass a very rigid physical examination?"</u></p> <p>B. <u>Questioning of applicants classified 4-F by Selective Service or those rejected for jobs because of physical examination, to determine whether a handicap exists.</u></p> <p>C. <u>Reason for an applicant's contact with a health agency, if such contact is indicated.</u></p> <p>D. <u>Reason for attendance at any special classes, such as, sight conservation, lip reading, speech correction, ungraded, etc.</u></p>

Points to be Made	Suggested Supporting Material
	<p>E. Illness or mental deficiency may be indicated if an applicant was substantially <u>older than the average at the time of graduation from public school</u> or if he had to repeat grades in school.</p> <p>F. A physical handicap may be indicated in a young applicant if he had no <u>athletic interest</u> in school or had <u>limited gym classes</u>.</p> <p>G. A physical disability may be indicated if an applicant states that he <u>left a job because the work was too heavy</u> or because of absence due to illness.</p> <p>H. A disability may be indicated if the applicant has been <u>unemployed for an unusually long period of time</u> or has changed jobs frequently.</p> <p>I. A handicap may exist if an applicant <u>refuses some particular kind of work</u> or expresses a definite preference.</p> <p>J. Persons <u>working below apparent intellectual capacity</u> may have an invisible handicap such as arrested TB, hearing impairment, or mental or neurological disorder.</p>
<p>I. <u>Review of best technique for securing information from applicant</u> (30 minutes)</p> <p>* (Chart on the board two * lists of <u>good</u> and <u>bad</u> interviewing techniques as mentioned by the group)</p> <p>A. <u>Good techniques</u></p>	<p>II.</p> <p>A. <u>Probable answers for good interviewing techniques.</u></p> <ol style="list-style-type: none"> 1. Securing as complete information as possible about the handicap. 2. Let the applicant realize that his <u>work qualifications</u> in relation to his handicap are of major concern.

Points to be Made	Suggested Supporting Material
B. <u>Bad interviewing techniques</u>	<ol style="list-style-type: none">3. Tell applicant that we refer to jobs on the basis of <u>ability to perform</u>.4. Have a matter of fact approach -- <u>no sentimentality nor repugnance</u>.5. Be <u>considerate</u> but not sentimental.6. Be aware of the fact that the <u>applicant may try to oversell or undersell himself</u>.7. Use <u>test batteries and references from previous employers</u> to assist in getting exact information about the applicant's work capacity.8. <u>Frequent re-interviews</u> are desirable in order to know the applicant better.
C. <u>Exercise No. 18 "Group practice in phrasing questions for interviewing"</u> (20 minutes)	<p>B. <u>Probable responses for bad interviewing techniques.</u></p> <ol style="list-style-type: none">1. Over-emphasis on the handicap.2. Thinking chiefly in terms of work limitations.3. Any sentimentality.4. Pity.5. Fear in attitude toward the applicant. <p>C. The instructor will raise six problems listed in <u>Exercise No. 18</u> orally with the group, and note on the board in two lists the good techniques and the bad techniques for the six problems, in order to <u>provide practice in phrasing questions for interviewing.</u></p>

Points to be Made

Suggested Supporting Material

II. Review of the considerations involved in securing medical reports

(45 minutes)

A. Handicaps and medical reports

- * (Ask what types of handicaps
- * on which a medical report is always desirable.)

B. Disabilities for which a medical report is sometimes desirable

- * (Ask for what disabilities
- * a medical report is sometimes desirable)

C. Source of medical reports

- * (Ask where we secure
- * medical reports)

III.

A. For the following disabilities, medical reports are always desirable:

Cardiac disease	Silicosis
Rheumatic fever	Varicose veins
High blood pressure	Pleurisy
Injuries to the back	Multiple Sclerosis
Arteriosclerosis	Muscular dystrophy
Chronic internal disorders	Epilepsy
Osteomyelitis	Mental disorders
Bronchiectasis	Venereal diseases
Arthritis	Eye diseases
Rheumatism	Defective vision
Chorea	Total blindness
Flat feet	Encephalitis
Asthma	Emphysema
Bronchitis	Thrombo-angiitis
Skin disease	Tuberculosis of the bone
Empyema	
Pulmonary TB	

B. On the following disabilities a medical report is desirable only if the applicant is under treatment or has had recent treatment or if the disability is progressive or involves a condition which might be improved by medical attention:

Spinal injuries
Cerebral palsy
Amputations
Hernia
Poliomyelitis
Blindness of one eye sometimes

C. Physical information is secured from the applicant. Medical information is secured from a doctor who attended him. The doctor may be a private practitioner, hospital staff doctor, or he may be attached to any agency cooperating with the Employment Service, such as the Bureau of Vocational Rehabilitation, the State Commission for the Blind, Selective Service Boards the Army and the Navy, etc.

Points to be Made	Suggested Supporting Material
<p>D. <u>Use of the "Physical Capacities Appraisal" form as a check list</u></p> <p>E. <u>Confidential nature of medical data</u></p> <ul style="list-style-type: none"> * (Ask if information * secured in a medical report must be kept confidential) <ol style="list-style-type: none"> 1. Definite understanding necessary 2. Discretion necessary in discussions with applicant <p>F. <u>Exercise 19, "Determining when medical reports are desirable"</u></p>	<p>D. When information about the disability is secured from the applicant only, the interviewer uses the Physical Capacities Appraisal as a check list for questioning the applicant about those items most closely related to his stated or apparent disability.</p> <p>E. Hospitals or other agencies frequently require the applicant's permission before information will be released. This requirement can be met by sending to the hospital a waiver which the applicant signs.</p> <ol style="list-style-type: none"> 1. A definite understanding is necessary as to when the Employment Service may release medical information secured in a report, to whom it may be released and under what circumstances is required. 2. Interviewers should exercise great discretion in discussing the contents of a report with any applicant. If the applicant has requested information we might ask him what the doctor told him, instead of giving out information that we have. We should never give him the report as given to us. <p>F. <u>Exercise No. 19 has as its objective practice in determining when medical reports are desirable.</u></p>
<p>IV. <u>Review of best practices in recording information</u> (10 minutes)</p>	<p>IV. Much of the additional technical information secured about the handicapped would be lost if it were not properly recorded.</p> <p>Standard practices of recording are all designed to improve the use that can be made of the notations.</p>

Points to be Made	Suggested Supporting Material
<p>A. <u>Minimum information about the handicap on the application card</u></p> <ul style="list-style-type: none"> * (Ask the group what * information must appear on the application card about any handicap, and develop the list of items on the board) 	<p>A. <u>Probable responses:</u></p> <p>A review of all the INTERVIEWING AIDS will disclose that the following information should appear on the application card:</p> <ol style="list-style-type: none"> 1. <u>The name of the disability, (i.e., cardiac condition) should be stated except in mental disorder cases and venereal disease.</u> 2. <u>The approximate date the disability was received, and if pertinent, the cause of the disability should also be recorded.</u> 3. <u>Whether the condition is progressive or non-progressive should be stated.</u> 4. <u>The extent of the disability should be described.</u> 5. It should be shown positively <u>how much</u> the individual is able to <u>walk, stand, lift, grip, hold, reach, etc.</u> <p>To illustrate: "Left leg amputated above knee, can walk slowly but for long periods when wearing limb"; "Right arm disabled, stiff at elbow, flexed at 45° angle, can grasp, and finger."</p>
<p>1. <u>Review of best techniques for matching physical capacities with the physical demands of jobs (60 minutes)</u></p>	<p>V. We have said that the process of matching physical capacities with the physical demands of jobs starts with assigning the proper classification to the worker. It involves consulting the available occupational information about jobs to discover suitable work and that also involves techniques for persuading employers to hire workers whom they might not otherwise recognize as capable of performing. Often it requires an element of counseling to prepare the worker himself for a new kind of work or to adjust his attitude toward a particular job. Each of these items will be discussed in turn.</p>

Points to be Made	Suggested Supporting Material
<p>A. <u>Determining the proper classification</u></p>	<p>A. When a handicapped applicant is found to be employable on the basis of his current skills and capacity, the interviewer is challenged to uncover jobs that the man can fit.</p>
<p>1. Importance of a wide background of occupational information</p>	<p>1. To do this, then, the interviewers must know the physical demands of a wide variety of jobs or must be able to find out about those demands quickly and readily.</p>
<p>2. Sources of occupational information</p>	<p>2. A list of the sources of occupational information for the use of interviewers for the handicapped should include:</p>
<p>* (Note the sources on the * board as the group suggests items)</p>	<p>a. First-hand information and experience, constantly gathered from field trips and observation.</p> <p>b. Information secured from interviewing applicants and talking with employers.</p> <p>c. Definitions in the "Dictionary of Occupational Titles," as a start.</p> <p>d. The National Job Description Volumes.</p> <p>e. The recent 5 x 8 job description and interviewer aid cards.</p> <p>f. The special aids for placing military personnel in civilian jobs.</p> <p>g. The job families.</p> <p>h. Bulletins on utilization of persons having physical limitations.</p> <p>i. The national and local physical demands studies.</p>
<p>3. How to use the occupational materials</p>	<p>3.</p>
<p>a. The physical Demands studies</p>	<p>a. The actual physical demands studies, whether prepared nationally or prepared in the state or by the interviewer, himself, are of course, the best tools because they carry the information to the fine point necessary for the placement job for the handicapped.</p>

Points to be Made	Suggested Supporting Material
b. The other occupational publications	b. The definitions in the Dictionary and the various types of job descriptions supply necessary background information to the interviewer. He must himself carry it one step further and examine the demands of an individual job before he can make extensive use of the data in placing applicants.
4. The importance of individual considerations in classifying	4. As background it cannot be emphasized too frequently that the skills and abilities of the handicapped worker must be evaluated on <u>an individual basis</u> . All individuals with the same handicap cannot be classified on the same limited groups of occupations. It is impossible to suggest wholesale, general occupational classifications for each type of handicap. People with the same handicap differ widely in potential ability.
5. Emphasis on remaining individual capacity	5. We have already stressed the principle that few handicaps cause the elimination of more than a fraction of an individual's total abilities. In classifying the applicant or placing him, it is not what is gone (the handicap), but <u>what is left</u> (the individual's principal capacity) that <u>counts</u> .
6. Principles of classification	6. Choosing suitable work for the handicapped is based on the same principles as choosing suitable work for any applicant. Factors to be considered are his experience, his training, his aptitudes and his interests which are not influenced or nullified by the physical limitation.
*(Ask, "Upon what do we * base the determination of a suitable field of work for the handicapped applicant?")	
a. The importance of former experience	a. As in any placement one of the most important principles in selecting a suitable occupation for a handicapped applicant is to capitalize upon his previous experience, leading him, if possible, to the occupation followed prior to the disability.

Points to be Made

Suggested Supporting Material

b. Remote experience may be helpful

b. If the recent job is no longer suitable, the applicant may return to a line of work done years previously. Work history must thus be studied carefully to determine if elements of previous jobs can be used as a basis for present employment.

c. The importance of job family to analyze kind of work

c. The job family material can be particularly helpful in analyzing experience accumulated on former jobs and relating it to occupations with physical demands of the different nature.

7. Assignment of a particular title and code

7. After his discovering the broad field in which the applicant's potentialities are greatest, the interviewer must aid the applicant to determine the occupations within that field in which the impairment of certain functions will not limit his performance.

a. Use of the Dictionary of Occupational Titles including the entry classifications

a. To make the applicant readily available for selection and referral to actual jobs, occupational titles and codes must be assigned from Part I, Part II, Part IV of the Dictionary, and the occupational groupings for entry applicants.

The use of the entry classifications in Part IV of the Dictionary and in the occupational grouping manual is especially helpful in view of the large number of both experienced and inexperienced applicants whose classifications must be based on potential abilities rather than on demonstrated experience.

The proper classification of a handicapped applicant is difficult to overstress because it amounts to summarizing the conclusions reached in the interviewing process.

Points to be Made

Suggested Supporting Material

B. Assisting the applicant to develop a work plan

B. The process involves a large element of cooperative planning between the applicant and the interviewer. The active participation of the applicant must be listed in the working out of his occupational classification.

1. May lean heavily on the interviewer

1. Disabled persons often lean heavily on the interviewer for the selection of a job plan and fail to develop the self-reliance that is necessary for the solution of their problems.

2. Importance of explaining the underlying reasons

2. Unless the reasons for a particular classification are clear to an applicant and he accepts them because he has had a part in their choice, he may distrust classifications assigned and fail to cooperate with the interviewer.

C. Securing the employer's acceptance

C. After using the approach to the placement of the handicapped based on work capacities that we have been discussing, the interviewer is in a strong position to persuade employers to employ workers considered handicapped.

* (Ask, "What are some of
* the techniques for interesting an employer in using a handicapped person?")

The interviewer is justified in making a special effort to secure an opportunity for a handicapped applicant when he is convinced that the applicant can do the job.

Some good points of technique are the following:

1. Stress qualifications
always before disability

1. Describe exactly what a man can do on the job and then say that the fact that the man has a severe limp in no way limits the calibre of the work he can do.

2. Use specific name of disability

2. A better mental image is produced if the interviewer used the specific name for a disability, such as "cardiac" or "hard of hearing" rather than a general term like "handicapped" or "disabled."

The specific disability is less likely to arouse prejudice than the general picture aroused by the vague term which may conjure up a far more severe limitation.

Points to be Made	Suggested Supporting Material
<p>3. <u>Using specific individual as example</u></p>	<p>3. The initial approach to an employer is better made for a specific individual or group of individuals than for a type of worker in general.</p> <p>By using a specific individual the interviewer can demonstrate actual ability to do a particular job by applying the physical demands analysis to the job and to the worker's capacity.</p>
<p>4. <u>Stress advantages of the handicap</u></p>	<p>4. Stress any advantages of the handicap for the particular job, such as use of the deaf in noisy places, and the like.</p> <p>Emphasize that disabled persons usually put forth more effort, are less likely to leave, lose less time, and seem to be less prone to accidents. Use of references from previous employers is often helpful. Refer only suitable applicants.</p>
<p>5. <u>Overcome specific objections with facts</u></p> <p>* (Ask: "What are some of * the common objections to using the handicapped?")</p> <p>a. "Insurance rates"</p>	<p>5. Many employment offices have had conspicuous success in demonstrating the capacity of blind workers, and the deaf, and these can be cited.</p> <p>Some of the common objections to using the handicapped and the way they can be answered, are the following:</p> <p>a. <u>The idea that the employment of handicapped means higher cost and compensation insurance rates.</u> This objection is not valid because all available studies indicate that <u>handicapped groups are not as liable to accident as the non-handicapped</u>, probably due to the greater caution exercised by handicapped workers to avoid accidents. Moreover, <u>most State laws do not result in higher insurance costs.</u> The interviewer must be familiar with the appropriate laws for the State.</p>

Points to be Made	Suggested Supporting Material
b. "Sick benefits and life insurance"	<p>b. <u>Employment of handicapped will strain plan for sick benefits or group insurance.</u> This objection is not valid because no studies ever indicated that the handicapped are more liable to illness or injury than the non-handicapped. Western Electric studies of absenteeism of handicapped and non-handicapped workers shows the handicapped with lower percentage of sick leave.</p> <p><u>Life insurance rates are based upon age and sex rather than physical condition.</u></p>
c. "Frequent illness"	<p>c. <u>The handicapped are frequently absent because of weather conditions or illness and cannot be depended upon to work regular hours.</u> This objection can be met with the same points mentioned above and moreover an employer of a handicapped person who is referred on the basis of a medical report is <u>actually better protected</u> than he would be had he hired a non-handicapped person without medical examination.</p>
d. "Efficiency"	<p>d. <u>Disabled persons are not as efficient as normal workers.</u> This objection can be met by stressing the fact that the handicapped are <u>referred only to jobs where they can compete satisfactorily with the non-handicapped.</u></p>
e. "Difficulty of shifting"	<p>e. <u>Handicapped workers cannot be shifted as easily to other jobs in slack times.</u> The answer to this question requires information on what "the other jobs" are. If the other jobs have the same physical qualifications, the handicapped can be transferred to them.</p>
f. "Objections of fellow employees or customers"	<p>f. <u>Other employees object to the handicapped or customers object to asking the handicapped for service.</u> This objection is an expression of the traditional attitude that has long denied handicapped people an equal opportunity to develop their capacities. <u>Objection of fellow employees is more theoretical than factual.</u> Handicapped workers</p>

Points to be Made

Suggested Supporting Material

g. "Special attention"

have repeatedly demonstrated that if they have a normal attitude toward work, their fellow employees can work with them without strain. The sales manager of a very successful New York department store uses a cane, but finds no difficulty in his relations with staff or with customers.

g. Crippled persons expect special attention, advantages and consideration. This objection must be met with an individual discussion of the personality of an applicant.

References from former employers or from employees help to break down this objection for handicapped people who have developed self-reliance and no longer need supervision.

h. "Need to provide for own disabled employees"

h. Firm cannot employ other handicapped workers because it provides for its own employees who become disabled. This objection can be met by stressing that referrals are on the basis of qualifications and ability to compete. Further, if a general policy of this kind were adopted, no person handicapped before his first employment or between jobs, would ever find his place in industry.

i. "Physical examination"

i. The entrance physical examination rules out all physical disabilities. This objection can be met by stressing the fact that applicants referred are physically capable of meeting all the demands of the job. A physical examination that automatically eliminates all but perfect specimens greatly reduces the available labor supply.

D. Promotion of opportunities for the handicapped

D. Work for the handicapped often involves active solicitation of job openings for particular applicants. Leads can be secured from application cards which show firms that have utilized handicapped workers, from employer order cards, from interviews with applicants and employers and from advertisements in the papers.

* (Ask how leads to new employers for the handicapped may be secured)

Every means of solicitation can be employed appropriately at some time.

Telephone solicitation for individual applicants is probably the most widely used.

Points to be Made	Suggested Supporting Material
<p>1. Exercise No. 20 "Suggesting Promotional activities for applicants already classified"</p>	<p>1. <u>Exercise No. 20 has as its objective providing practice in suggesting promotional steps on behalf of certain applicants.</u></p>

RECESS FOR LUNCH

PRESENTATION (continued)

I. Assistance to handicapped workers who are not immediately employable

VI. In addition to the handicapped who are employable in terms of their current skills, there are three other groups - those whose handicaps constitute a complete disability, those whose handicaps require training or rehabilitation before placement, and those whose handicaps make them unable to compete in the current labor market.

A service can be rendered to each group by the employment office.

A. Those not able to compete in the labor market

A. When the applicant is so limited that he cannot meet the normal conditions of industry he is considered unplaceable. Usually such persons have a combination of handicaps involving lacks in experience, education, training, personality and the like, as well as the physical or mental limitation.

Sometimes they may be able to work eight hours a day, but they may be unable to meet employer requirements in production.

1. Size of "Unplaceable group" varies with labor market

1. The size of the "unplaceable group" is naturally variable.

In times of economic depression the group of the "unplaceable" will be larger than that remaining when expanding labor demand absorbs less-and less-efficient workers.

2. Employment office service to the "unplaceable"

2. Since our maximum effort must be directed toward the workers who are able to compete in the current labor market, comparatively little assistance can be given to the "unplaceable," however, the interviewer can suggest assistance other than employment.

* (Ask what can be done for
* these so-called "unplaceables")

Points to be Made

Suggested Supporting Material

3. Sheltered work shops

a. Different community agencies

b. Therapeutic value

4. Homework

a. Need for statutory information

b. Points to be checked

3. Some non-profit work-places provide jobs for individuals who cannot compete with the non-handicapped, or who have been unable to secure jobs in industry.

a. Sheltered shops exist in some communities for tuberculosis patients, the blind, and persons with mental disorders. Workers may be employed for less than a standard day or they may be employed on jobs where production standards are low.

Describe any sheltered workshops in the community.

b. This service is provided for its therapeutic effect in the treatment of handicaps or for the purpose of determining physical capacity. A person may "graduate" from sheltered shop into industry by recovering sufficient working capacity to compete again, or labor scarcity in the community may make it necessary to use these workers in regular production.

4. Because the giving out of work by employers to be done at home by workers has been abused in the past, homework tends to be discouraged by strict legislation in many States. In some communities, however, because of labor shortage, some war employers are giving out homework under special dispensation.

a. The interviewer should be sure to know all of the Federal, State and local regulations regarding homework in the community.

b. The interviewer will check whether the applicant must provide means to pick up the work or whether it is delivered to him, and emphasize to the applicant that he is expected to earn the legal hourly minimum.

Points to be Made	Suggested Supporting Material
<p data-bbox="16 260 541 318">B. <u>Those placeable after some rehabilitation</u></p> <p data-bbox="16 357 541 550">* (Note: The instructor may * provide for having this part of the training session conducted by a representative of the Bureau of Rehabilitation)</p> <p data-bbox="16 743 541 782">1. Private agencies</p> <p data-bbox="16 821 541 937">* (Note: The instructor * should have available the names of the agencies operating locally)</p> <p data-bbox="16 975 541 1033">* (Ask the group to name * local agencies)</p> <p data-bbox="16 1072 541 1110">a. Special agencies</p> <p data-bbox="16 1439 541 1497">b. Fraternal groups and service clubs</p> <p data-bbox="16 1806 541 1845">c. Clinics and hospitals</p>	<p data-bbox="541 260 1477 550">B. In order to be prepared for the best opportunities a handicapped applicant should be restored to as great a degree of physical or mental health as possible and equipped with some particular skills. Physical restorations may be made by medical or surgical care or by some artificial appliance to aid, support, or replace a sensory function or body part. (hearing aids, spinal braces, artificial limbs)</p> <p data-bbox="541 589 1477 724">Both private and public agencies in the community help to restore handicapped people to physical or mental health and/or to equip them with some particular skill.</p> <p data-bbox="541 753 1477 792">1.</p> <p data-bbox="541 1072 1477 1400">a. Typical examples of agencies interested in problems of the handicapped are the National Society for Crippled Children, and its local affiliates, the National Tuberculosis Association, Leagues or Associations for the Hard-of-hearing, National Foundation for Infantile Paralysis and organizations providing special services to the blind, or cardiacs, or other specific types.</p> <p data-bbox="541 1439 1477 1767">b. Fraternal organizations, veteran groups, and service clubs, give special assistance to the handicapped, both in securing employment and in financing general education or vocational training. Physical and vocational rehabilitation, including prosthetic appliances, are sometimes made possible through their assistance. The American Red Cross provides services for the handicapped in many cities.</p> <p data-bbox="541 1806 1477 1864">c. Medical services are available in many cities through local hospitals and clinics.</p>

Points to be Made	Suggested Supporting Material
<p>d. Advantages of cooperation with private agencies</p> <p>* (Ask the group to mention some of the advantages of cooperation)</p>	<p>d. Some of the advantages of cooperation with private agencies are the following:</p> <ol style="list-style-type: none"> (1) Medical aid, artificial appliances, or vocational counseling may be secured for applicants not immediately placeable. (2) Information concerning physical handicaps and work limitations may be secured from their professional personnel. (3) They may be able to suggest suitable occupations for difficult placement problems among the handicapped. (4) Detailed information may be available through their past contact with certain applicants. (5) In some cases, arrangements may be made to secure medical information or medical records through specialized agencies. (6) They may assist in locating job opportunities and in placing handicapped applicants. (7) Cooperation with them should increase community recognition and good will for the Employment Service.
<p>2. Public Agencies</p>	<p>2. The public agencies available to work with the Employment Service include the following:</p>
<p>* (NOTE; The instructor * will again need a local list)</p>	
<p>a. Hospitals: institutions</p>	<p>a. <u>Hospitals and institutions for physical restorations and occupational therapy.</u> Cooperation between the hospitals and institutions and the Employment Service is entirely voluntary. Medical social workers and doctors act as consultants in many States.</p>
<p>b. Schools</p>	<p>b. <u>Schools</u> (including special schools for war training) teach specific occupational trades or professions to the handicapped.</p>

Points to be Made	Suggested Supporting Material
<p>c. The Bureau of Rehabilitation: The most important single service for training and rehabilitation</p>	<p>c. Each state now has a <u>special bureau responsible for the vocational rehabilitation of the physically handicapped</u>. In some States a separate agency for the blind handles the rehabilitation of the blind. When States meet the necessary requirements, Federal funds are made available for use in rehabilitating individuals disabled in industrial accidents or from some other causes, such as disease or congenital defects. The 1943 amendments include service to war-disabled civilians. This law permits the use of Federal funds for such purposes as:</p>
	<ul style="list-style-type: none">(1) Medical examination.(2) Corrective surgery or therapeutic treatment which will reduce a handicap.(3) Necessary hospitalization incidental to the foregoing.(4) Transportation, occupational licenses, tools and equipment.(5) Prosthetic appliances essential to obtaining or retaining employment.(6) Maintenance during training.(7) Cost of retraining.
<p>(1) Functions of the Bureau</p>	<p>(1) Functions of the Bureau include:</p> <ul style="list-style-type: none">(a) Physical restoration, including medical treatment and prosthesis if needed to obtain or retain employment.(b) Counsel and advice on selection of suitable occupations. This may include testing.(c) Arrangements for vocational training (<u>Note</u>: the Bureau itself does not train. Rather it places the client in suitable training with proper agencies.)

Points to be Made

Suggested Supporting Material

(2) Eligibility for training

- * (Ask who is
- * eligible for training)

(3) Working relationships between the Employment Service and the Bureau of Rehabilitation

d. Agencies for the Blind

(1) Extensive cooperation on voluntary basis

(d) Placement

(e) Other services, such as establishing a person in his own business.

(2) A person must be of employable age and unless specific exceptions are made, a resident of the State in which the service is provided.

The physical handicap must be permanent and of such nature that training, re-training or other service is necessary to overcome a handicap before he can enter suitable employment on a full-time basis after training.

(3) The Employment Service refers to the Bureau of Rehabilitation potential applicants for their service, renders placement service to people trained through the Bureau of Rehabilitation, and supplies the Bureau with current labor-market and other information.

The Bureau of Rehabilitation refers their applicants to the Employment Service for placement and cooperates with it on problems of employability, work capacity, suitable occupations, etc

d. State commissions for the blind or other authorized State agencies are designated as the licensing authority for blind persons who operate stands in Federal and other public building.

(1) They work with the Commission of Education and the Bureau of Rehabilitation in training, placing, and supervising blind persons. They also rehabilitate them through medical or surgical treatment. Working agreements between the agencies and the Employment Service are voluntary. The Employment Service relies to a large extent on the advice of the personnel of the commission in the placement of the blind.

Points to be Made	Suggested Supporting Material
<p>e. Agencies for the deaf</p> <p>3. Developing community agency cooperation on the basis of mutual aims</p> <p>a. Basis of cooperation</p> <p>b. Methods of exchanging information</p> <p>c. Specific procedures</p>	<p>e. In addition to school for the deaf, some States also have a special service to assist them in getting employment.</p> <p>3. In order to discharge the full legal responsibilities of the Employment Service for the placement of the handicapped, every employment interviewer should work toward the development of an active cooperation between the Employment office as a placement agency, and the other agencies in the community that offer service of any kind to the handicapped. A recognition that <u>the aims</u> of these agencies and of the Employment Service <u>are mutual aims</u> will lead to a day-to-day cooperation.</p> <p>a. Any <u>cooperation</u> between two agencies <u>requires that the employees of each clearly understand the functions and responsibilities of the other.</u> The better acquainted the employees are with the methods and forms in use in all the agencies, the more intelligent the use that can be made of their resources.</p> <p>b. Some of the <u>means</u> that can be used to maintain cooperative relationships are <u>exchange of visits, exchange of speakers, and joint conferences.</u></p> <p>c. <u>Specific cooperative procedures which involve medical reports, clearance of job openings and exchange of technical information</u> can often be worked out.</p>
<p><u>Brief survey of laws relating to the employment of the handicapped</u></p> <p>A. <u>Federal laws</u></p>	<p>VII. Without attempting to mention in detail all the laws affecting the employment of the handicapped, this section will sketch the nature of those laws. For reference, summaries of the most important laws appear in the handbook.</p> <p>A. Federal laws affecting the employment of the handicapped are the following:</p> <p>1. <u>Vocational rehabilitation</u> (discussed previously).</p>

Points to be Made

Suggested Supporting Material

B. State laws

- * (The instructor must
- * supply the facts of the appropriate local laws and ordinances.)

C. Local laws and ordinances

Transition: The over-all survey just completed has covered a general picture of best methods both for placing the handicapped on the basis of their work capacity and directing them to other sources of help if necessary.

Specific attention can now be directed to the special problems of handicapped workers who are also war veterans - a constantly enlarging and important group of workers.

2. Social Security Act, 1937 (Aid to dependent children, child health services, services for crippled children, public health services, and aid to the blind.)
3. Randolph Sheppard Act, 1936 (concerning arrangements for the blind to operate stands in Federal buildings.)
4. Wage and Hour Regulations. As a rule interviewer should avoid placement of the disabled at lower than the standard wage rates. Sometimes, however, sub-minimum rates may be necessary when the disabled person cannot compete with others on a production basis. Provision has been made in the law for interpretation to be made by the Wage and Hours Division as to when the sub-minimum rates may be paid.
5. Civil Service Regulations - Labor shortages have caused Civil Service regulations regarding the employment of the handicapped to be liberalized. Final determination has been left to the appointing officials.

- B. Interviewers for the handicapped will need currently accurate information on State laws concerning workmen's compensation, rehabilitation, homework and employment of special handicapped groups such as the blind, the deaf, etc.

Instructor's
Discussion Outline

SPECIAL CONSIDERATION FOR THE PLACEMENT OF HANDICAPPED VETERANS

Objective: To develop an understanding of the responsibility of the interviewer for the placement of handicapped veterans.

Outline of

- Main Points:
1. The responsibility of the public employment service (10 minutes)
 2. Survey of the size of the problem of placement for returning veterans (15 minutes)
 3. Survey of the work of other agencies in the field (30 minutes)
 4. Review of Employment Service activities on behalf of veterans (45 minutes)
 5. Presentation of the role of the placement interviewer in the process of adjusting the returned veteran who is handicapped (15 minutes)
 6. General summary of the job (20 minutes) May be used to conclude the entire program on the sixth day.

Training Program for Serving the Handicapped

Unit 5-b

Fifth Afternoon (1½ hours)



Points to be Made

Suggested Supporting Material

MOTIVATION (10 minutes)

- I. The Veterans as Part of the handicapped Group
 - A. Returning group already sizeable
 - B. Continued post-war importance
 - C. Both men and women now returning
 - D. Inexperienced young people in the group

- I. Veterans of World War II are constantly increasing as a percentage of the physically and the mentally handicapped workers of the country.
 - A. Returning them to productive employment is a problem of considerable magnitude in all communities now.
 - B. It will continue to grow in size and importance throughout the war and during the post war years.
 - C. Both men and women disabled veterans now being released want to contribute to the winning of the war and want to use their work capacity to be economically self-sufficient.
 - D. Included in the veteran group are workers under 21 years of age whose war service entitles them to be classified as veterans, but whose relatively limited work experience may make employment counseling necessary.

- II. Present Enthusiasm of Employers

- A. Turnover and morale factors
- B. Possible change post-war

- II. Because veterans are not likely to be called back to service, employers are now receptive to hiring such applicants.

- A. Because they are not liable to be called for military service (being largely in Selective Service - classification 1-C), the employment of servicemen tends to keep down turnover. Moreover, the presence of Veterans in a plant has been found beneficial to morale in war production plants.
- B. A changed attitude is possible when the war ends, however, returning able-bodied veterans to the labor market. Rendering the most effective possible selective placement to the disabled veterans now, and of constantly educating employers in the proper use of the work capacities of the handicapped, is a major responsibility.

- III. Responsibility of the Public Employment Service

- III. Not only is the Public Employment Service legally required by its fundamental legislation to offer service specifically to veterans and specifically

Points to be Made	Suggested Supporting Material
	<p>to the handicapped, but also in a large social sense, the Public Employment Service is the logical source of placement service for men returning from war duty, and again seeking their place in the economy.</p>

PRESENTATION

The Size of the Problem (15 minutes)

A. All types of handicaps represented

*(Ask what some of the
* handicaps presented
may be.)

1. Examples: - All the way from orthopedics to deafness

B. Discharge papers no indication of the exact nature of the handicap.

1. Reasons in the Handbook

(Have the group turn to Section VII of Part I of the Handbook, and follow the official reasons for discharge.)

- I. On December 1, 1943, approximately 30,000 to 35,000 service men and women were being discharged from Army and Navy hospitals for disability reasons. As the war progresses, the figure may grow with a higher percentage of battle casualties.

- A. These veterans will have the full range of physical and mental disabilities. In order to place these men and women, the interviewer will be challenged to make use of his total knowledge of jobs, their working conditions and what they demand physically and mentally of workers, as well as how to evaluate the working capacities of the workers themselves.

1. Examples could be cited, ranging all the way from amputation handicaps through cases of psychoneurosis, to hearing limitation from the din of battle.

- B. Veterans' discharge papers contain no definite medical information. Naval and Military authorities have purposely done this since they are unwilling to broadcast generally what is the matter with the veteran.

Because of social attitudes which we have discussed in previous sections, general knowledge of these handicaps might prevent employers from using the veterans.

1. For our own information, general indications of the reasons officially cited by the Army for discharge appear in Section VII of Part I of the Handbook. As given by the War Department on the back of the discharge form itself, they appear in the following terms:

Section II means disabled.

Section V means dependency.

Section VIII means general lack of suitability for military life.

Points to be Made	Suggested Supporting Material
<p>2. Information confidential</p>	<p>A yellow paper represents a dishonorable discharge, and such individuals do not have veteran status.</p> <p>(The employment service, however, has the same responsibility for giving service to these men as to all other civilians.)</p> <p>2. For the reasons we have discussed, all the information concerning discharge must be kept confidential for the protection of the applicant.</p>
<p>II. <u>Activities of Other Agencies</u> (30 minutes)</p> <p>A. <u>The Veterans' Administration: Retraining</u></p> <p>B. <u>The Selective Service System: Return to former employment</u></p> <p>C. <u>The armed forces</u></p> <p>1. Supply occupational information on service assignments</p> <p>2. Arrange interviews in hospitals</p> <p>D. <u>The Civil Service Commission: Special preference</u></p>	<p>II. Many other agencies are actively concerned with assistance to disabled veterans. Interviewers for the handicapped require an understanding of the relationship between these agencies and the Employment Service.</p> <p>A. <u>The Veterans' Administration</u> gives free re-training to veterans with an employment handicap due to a service-connected disability. It also handles claims for pensions, and administers the hospitals for veterans.</p> <p>B. <u>Selective Service</u> assists all Veterans including the disabled to return to their former employers if they desire. If they were unemployed at induction or wish to change occupations, Selective Service refers them to the Employment Service.</p> <p>C. The armed forces will cooperate with the Employment Service in the following ways:</p> <p>1. Information regarding jobs performed in each branch of the armed forces is released to the Employment Service upon request.</p> <p>2. Staff members of the Employment Service interview hospitalized men and women about to be discharged from the armed forces. This program will be discussed in detail as part of the work of the Employment Service proper.</p> <p>D. The Civil Service Commission establishes eligible lists for jobs giving preference to honorably discharged veterans having service-connected disabilities (in existence at the time preference is claimed.)</p>

Points to be Made	Suggested Supporting Material
<p>1. Some State preferences</p>	<p>1. Some State Civil Service Commissions have similar arrangements for preference. (Describe any State provision.)</p>
<p>III. <u>Present Activities of the Public Employment Service on Behalf of Veterans</u> (45 minutes)</p> <p>A. <u>This training program part of our veterans work</u></p> <p>B. <u>Veterans' Employment Service and the Veterans' Representatives</u></p> <p>1. Close cooperation with interviewers serving the handicapped</p> <p>C. <u>Employment Service representatives in veterans' hospitals</u></p> <p>1. Effect of this plan on morale</p>	<p>III. The Public Employment Service in every State is actively concerned with developing and extending its service to returned veterans, as part of its legal and its general responsibilities.</p> <p>A. This nation-wide training program is to a considerable extent the reflection of a recognition that staff members of the Public Employment Service will require special equipment to enable them to render effective service to men and women who find themselves handicapped because of their military service.</p> <p>B. Every employment service has in its organization a formal provision for service to veterans.</p> <p>The Veterans' Employment Service is part of the regular Employment Service and is responsible for developing employment opportunities for war veterans including disabled veterans. It functions as a liaison between disabled veterans and existing services for the handicapped within the employment office. It maintains a representative in each local employment office.</p> <p>1. The veterans' representatives in local employment offices necessarily work closely with the interviewers serving the handicapped.</p> <p>C. Representatives of the Employment Service interview at the hospitals those to be discharged from the armed forces. Complete information is secured concerning pre-service employment, armed service occupations, and physical capacity (from medical records or in consultation with doctors.)</p> <p>1. By making practical and concrete the government's concern for the disabled veteran's prompt and effective return to industry, this program has already contributed enormously to morale.</p>

Points to be Made	Suggested Supporting Material
<p>2. Importance of full and accurate application cards</p> <p>3. Proper use of physical demands approach can minimize shortcomings</p> <p><u>D. Regular placement activities on behalf of handicapped veterans</u></p>	<p>2. These completed applications are then sent to the employment office in the area where the veteran wishes to work. Many interviewers trained in this course may be assigned to the taking of registrations in hospitals. Since these cards will be used by placement workers who did not originally take the registrations, the importance of making them full, accurate, and readily understandable, cannot be overstressed.</p> <p>3. Many of the cards taken under this procedure up to this date have not proved useable for placement purposes. The physical demands analysis terminology provides an interviewer with a real tool to do a thorough job of analyzing the work capacity of veterans in hospitals and should improve the effectiveness of the procedure.</p> <p>D. In general, it can be said that the activities of the placement service on behalf of disabled veterans are the same as those for persons handicapped under other circumstances, except that special openings may be secured for them by veterans' representatives or representatives of the Selective Service System. They may also receive the benefit of Veterans' preference in Civil Service jobs.</p>
<p>(Note: If there are interviewers in the class who will be interviewing dischargees in Army and Navy hospitals, the following training, based on sections 8700-8774 of the USES Manual, should be included. It may be covered at this point in the course, or on the sixth day under "Local Procedures". Because of local variations the instructor will have to develop this outline more completely, based on practices in the particular hospitals served. Assign sections 8700-8774 of the USES Manual for advance reading.</p>	

Points to be Made	Suggested Supporting Material
<p>E. Kit of Reference Materials</p> <ol style="list-style-type: none"> 1. Describe Kit of Reference Materials (Possibly Distribute Parts of it to trainees) 2. Obtaining List of Patients Approved for Discharge 3. Scheduling Interviews 4. Notifying Dischargees to Report for Interview 5. Records of Scheduled Interviews 6. Dischargees for Whom Registrations Should not be Taken <p>*(Ask what individuals should not be registered)</p> <ol style="list-style-type: none"> 7. General Information to be Given Dischargee <ol style="list-style-type: none"> a. Selective Service Reemployment Rights b. (Ask what agencies or organizations can advise veterans about pensions and other benefits and services.) 	<p>E.</p> <ol style="list-style-type: none"> 1. (See Section 8721 USES Manual for suggestions) 2. Army - CDD List (Certificate of Certified Disability) Navy - Survey List 3. <ol style="list-style-type: none"> a. Inform of purpose of interview in advance. b. Allot time for each interview 4. Method varies by hospitals 5. 3 x 5 card 6. <ol style="list-style-type: none"> a. Those who definitely intend to <u>go back to their old jobs.</u> b. Those who definitely intend to <u>go back to school</u> and who do not want the services offered. c. Those who for any other reason <u>do not want the services offered by the program.</u> d. Those who cannot name a <u>specific destination</u> as a city or community. 7. <ol style="list-style-type: none"> a. (See USES Manual, Section 8741) b. Veterans' Administration, Red Cross Office of Vocational Rehabilitation, Unemployment Compensation Agency, American Legion, Disabled American Veterans, Veterans of Foreign Wars, Reemployment Committeeman of local Selective Service Boards

Points to be Made	Suggested Supporting Material
<p>8. Obtaining medical records</p> <p>a. Reiterate importance of interpreting medical reports in physical demands terms</p> <p>9. All hospital registrations will be taken on Form USES-511.</p> <p>(If Form USES-511 is not in use in the State - Include here detailed instruction and practice in its preparation - See Section <u>8744</u>, USES Manual)</p> <p>(For States where Form USES-511 is in use, stress the following additional instructions for filling out application cards in hospitals)</p> <p>a. <u>Address</u></p> <p>* (Ask what address is entered.)</p> <p>* (Ask what is done if the applicant does not want to receive a notice at the address given.)</p> <p>b. <u>Occupational Titles and Codes</u></p> <p>* (Ask how instructions for this section for hospital interviews differ from other interviews.)</p> <p>c. <u>Willing to Leave City</u></p> <p>* (Ask what city this refers to.)</p> <p>d. <u>Veteran</u></p> <p>* (Ask what entry is made here.)</p>	<p>8.</p> <p>a. Examine before or after interview --</p> <p>b. Concerning interpretation of information, consult hospital medical authorities.</p> <p>9.</p> <p>a.</p> <p>Enter in pencil the address of the applicant at his destination.</p> <p>Write "See Comments" after the address, and under "Comments" explain that a call-in notice should not be mailed, but that the card should be held until the applicant comes into the office.</p> <p>b. If the card is going to be sent to a local office other than the one serving the hospital, enter the occupational titles and codes in <u>pencil</u>.</p> <p>c. The city which is the applicant's destination.</p> <p>d. Enter "Yes."</p>

Points to be Made

Suggested Supporting Material

e. Education and Training

- *(Ask what military education
- * and training is entered here)

- e. (1) regular training, such as an air-craft mechanics course (2) any correspondence courses,

(The United States Armed Forces Institute at Madison, Wisconsin has records of correspondence courses taken by military personnel.)

f. Dates

- *(Ask what is entered as the
- * first date in the column)

- f. The date the application card is filled out.

g. Employment Record

- *(Ask where you record the
- * applicant's army occupation)

- g. Describe first before pre-service employment is recorded.

- *(Ask what you record under
- * "Name of Employer" "Address" and "Kind of Business" for an army occupation)

Enter the name of the branch of the service and leave blank the items for "Address" and "Kind of Business."

h. Special Information

Enter physical capacity information as described throughout this course.
(Review if desirable)

h.

i. Signature of Interviewer

- *(Ask what additional information is entered)

- i. The signature of the interviewer should be followed by the name of the hospital.

j. Coding Hospital Registrations

- *(Ask how you indicate that
- * the card was taken at an army or navy hospital)

- j. Code either "A" or "N" in the next to the last selection factor block in the upper right corner of the face of the card.

In selective factor block "A", enter F for female, M for male.

- *(Ask how you show that the
- * applicant is a veteran of World War II)

Enter the code "WWII" in the last selection factor block.

Points to be Made	Suggested Supporting Material
10. Practice in filling out card.	10. Distribute blank salmon colored Forms USES 511. Read a typical case and ask each trainee to record information on the card. Collect, review, and discuss cards to determine whether above instructions for filling out card were understood. If desirable, repeat practice.
11. Use of "Special Aids in Placing Military Personnel in Civilian Jobs"	11. (It may be desirable to give these interviewers more intensive training on the use of these "Aids." See "Training Suggestions for Introducing Special Aids for Placing Navy Personnel.")
12. Inform about jobs in Federal Service and Veterans Preference *(Ask what you do if the applicant is interested in government employment)	12. a. Enter a notation under "Comments" on the card. b. If he is interested in a job in the locality, inform him of any Civil Service openings available at the local office and tell him to report to the local office as soon as he is discharged.
13. Make special arrangements to secure names of all doctors and dentists approved for discharge. *(Ask what you do after interviewing a doctor or dentist about to be discharged who hasn't decided upon the community where he intends to practice)	13. Send the following information by air-mail immediately to the headquarters of the Procurement and Assignment Service in Washington: a. Name, specifying whether MD or DDS b. Address where he may be reached the following 10 days c. Former place of practice or position, if any d. States in which he is licensed to practice

Points to be Made	Suggested Supporting Material
<p>*(Ask what you tell a doctor *or dentist who knows definitely where he is going to locate.)</p>	<p>e. Type of practice in which he is interested and places desired as future location.</p> <p>f. Exact date of discharge, if possible, or approximate date of discharge.</p> <p>g. Opinion of individual as to when he will be able to practice.</p> <p>h. Opinion, if possible, of medical officer in hospital as to physical and mental condition of individual, on when he will be able to practice.</p>
<p>14. Bring qualified discharges to attention of National Roster</p> <p>a. Make duplicate copy of USES-511</p> <p>b. Airmail to National Roster</p> <p>c. On original card note under "Comments" that duplicate has been forwarded to Roster.</p>	<p>Request him to get in touch with the Chairman of the Procurement and Assignment Committee in the State to which he is going.</p>
<p>*(Ask what you do if you are *interviewing a Civil Engineer who wants to be placed in the same city where he's being discharged.)</p>	<p>First attempt to place him in an essential activity which will fully utilize his critical skill. If he cannot be so placed, airmail the duplicate Form USES-511 to the National Roster.</p>
<p>15. Give a Veteran's Introduction Card to each dischargée interviewed.</p> <p>a. Distribute sample cards</p>	<p>15.</p> <p>a.</p>
<p>16. Routing hospital registrations</p> <p>*(Ask where you route registration cards for</p> <p>a. Dischargees who are going to another community in the State</p>	<p>16.</p> <p>a. Mail directly to the local office serving that community. (Enter date mailed as second date in "Date" column.)</p>

Points to be Made

Suggested Supporting Material

b. Dischargees who are going to another State

b. Mail directly to the Veterans' Employment Representative in the State of destination.

17. State VER forwards cards within 24 hours

17. State VER enters the date such cards are mailed as the second date in the column headed "Dates" on the face of the Form USES-511.

18. Speed necessary in routing cards

18. If veteran arrives at local office before card reaches it:

*(Ask why speed is necessary in routing hospital registration cards.)

a. Registration has no value

b. Hampers local office placement efforts

c. Unfavorable impression on veteran.

19. Registration of veterans at isolated points.

19.

*(Ask what methods can be used in registering veterans at isolated points.)

a. Registration through regular itinerant service.

b. Registration through special itinerant service.

c. Special handling of individual cases by the use of Service Officers of veterans organizations, or similar trained persons, to register the veteran.

d. Self-registration and mailing of registration card.

20. Mass registration may be arranged at discharge points in case of mass discharges.

Role of the placement interviewers in the process of adjusting returned veterans

IV. Our responsibility for effective placement of returning veterans highlights the public nature of the interviewer's job to a greater degree than perhaps any other group of workers. The disabled veterans' right to considerate and effective treatment in the employment agency operated by the Government he has served is clear. Every citizen, veteran or non-veteran, handicapped or non-handicapped, is similarly entitled to courteous and efficient placement service from his Public Employment Agency.

Points to be Made	Suggested Supporting Material
<p>A. <u>War service only underscores their rights as citizens</u></p> <p>B. <u>Newness of the handicap may affect worker's attitude</u></p> <p>Summary: Specifically, our responsibility is to use the best available methods for analyzing their remaining work capacities and for securing for the individuals an opportunity for productive work and a new adjustment to the community they have de- <u>ended</u></p>	<p>A. But the recency and the dramatic nature of the service and sacrifice of disabled veterans cannot fail to bring home to every interviewer the nature of his responsibility toward such workers.</p> <p>B. Many handicapped soldiers, because of the recency of their disabilities, will present psychological difficulties more intense than those of other handicapped workers who may have had time to begin adjusting to their difficulties. The circumstances under which soldiers suffered, and handicaps, may also affect their psychological attitude. Interviewers will require all their skill and experience to counsel handicapped veterans and assist them toward a satisfactory job adjustment.</p>

SUMMARY

(20 minutes)

- Compensations of the job of placing the handicapped

* (Ask the group to mention
* some of the compensations of the job, as the training program has reviewed it.)

(Note: This Section may be used after local procedures are discussed on the sixth day, as a formal conclusion to the program.)

- I. These sessions have stressed the fact that the job of placing the physically and the mentally handicapped is a stimulating one, requiring mastery of all the methods of professional placement.

Some of its compensations are that:

Points to be Made	Suggested Supporting Material
<p>A. <u>Utilizing of labor supply</u></p> <p>B. <u>Adjustment of individuals</u></p> <p>C. <u>Service to Veterans</u></p>	<p>A. It affords the interviewer an opportunity to serve the war effort directly by making available an important additional source of labor supply.</p> <p>B. It enables the interviewer to use his skills directly in achieving the satisfactory and productive adjustment of workers who might otherwise become dependent upon other people or upon the community for support.</p> <p>C. An important part of this factor will continue to be the offering of a needed service to war veterans.</p>
<p>I. <u>What is Involved in the Job of Placing the Handicapped</u></p> <p>* (Ask the group to name the three major types of information, and/or skill which they need to do their jobs.)</p> <p>A. <u>Analytical knowledge of jobs</u></p> <p>B. <u>Technical knowledge about disabilities and how they affect work capacity</u></p> <p>C. <u>Necessary background in psychology</u></p>	<p>II. These sessions have stressed the difficulties inherent in the job. Three of the major elements involved in it are:</p> <p>A. The interviewer must have a constantly increasing knowledge of occupations and that knowledge must be <u>analytical</u>, in that it specifies what each job <u>requires physically and mentally</u> - what we have called the <u>physical demands</u> approach.</p> <p>B. The interviewer must have a constantly widening technical knowledge of mental and physical disabilities and how they affect <u>work capacity</u>.</p> <p>C. The interviewer for the handicapped needs a much better than average understanding of human relationships and human motivations, not only for working with the applicants but also for working with the employers who hire them. To be effective, he must be a public relations man with employers and with other agencies in the community.</p>
<p>I. <u>Continuous self-training</u></p>	<p>III. Continuous study and development of background will add much to the interviewer's effectiveness and his satisfactions in his work.</p>

Points to be Made

Suggested Supporting Material

IV. Professional stature of
the job

IV. In the true sense then, the work of the interviewer who engages in placing physically and mentally handicapped is professional in nature. Its demands are great but its satisfactions and opportunities for growth are greater.

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